ORD INFORMATION RESOURCE CENTER, HCFA

MEDICARE/MEDICAID NURSING HOME INFORMATION

WEST VIRGINIA

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MEDICARE/MEDICAID NURSING HOME INFORMATION

1987-1988

WEST VIRGINIA

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Secretary
U.S. Department of Health & Human Services

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Administrator
Health Care Financing Administration

The Health Care Financing Administration (HCFA) was established on March 9, 1977, to combine health financing and quality assurance programs into a single agency. HCFA is responsible for the Medicare program, Federal participation in the Medicaid program, the Peer Review Organization program, the survey and certification program, and a variety of other health care quality assurance programs.

The mission of HCFA is to ensure the effective administration of its programs in order to promote the timely delivery of appropriate, quality health care to over 56 million of the nation's aged, disabled and poor. The agency must also ensure that beneficiaries are aware of the services for which they are eligible, that those services are accessible and of high quality and that agency policies and actions promote efficiency and quality within the total health care delivery system.

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The Administrator Washington, D.C. 20201

INTRODUCTION

This publication is another significant step in the efforts of the Health Care Financing Administration to provide information to the public in an understandable and usable form. We believe we have an obligation as the federal agency responsible for the Medicare and Medicaid programs to provide a broad range of information about the health care paid for through these programs. Furthermore, we believe that this information is helpful to consumers, health care professionals, researchers, and the health care industry, and we intend to continue our efforts to expand and improve the information we release.

This publication focuses on nursing homes. This is clearly an area of critical concern to many Medicare and Medicaid beneficiaries, their families, and the public in general. As such, I can think of no more important area where we need to provide information to help consumers make informed decisions and to supply the nation's nursing homes information on their performance.

This information is the product of extensive consultation with many individuals, including recognized experts in long term care, consumer advocates, representatives of the nursing home industry, state governments, physicians and nursing home residents and their families. We are grateful for their assistance with this publication. We have made a great effort to make it as clear and useful as possible.

The primary purpose of this information is to provide a solid basis for further, informal inquiry. It is neither the final, definitive word on nursing home performance, nor a guide to answer all questions on selection of a nursing home. Rather, it provides a rich source of background materials on federal and state enforcement programs and considerable information on individual nursing homes.

When properly understood and used, this information is quite useful; it can also be misleading if interpreted incorrectly. To use this information properly, you should read carefully the introductory material, the sections on uses and limitations, how to read the profiles, and the glossary. These sections will assist you in correctly interpreting and making the best use of the information.

Because we realize the limitations of the information, especially in making individual judgments on specific nursing homes, we have included a section entitled, "Further Considerations." This section is designed to help individuals find additional sources of information and ask the kinds of questions that will provide the best information to help make personal decisions on nursing homes. We think individuals who use this information as a source document will be better informed about health care issues they or their family may face. We trust that as a result, they will make more informed and thus better decisions.

William L. Roper, M.D.

William L. Koz

Administrator

USES AND LIMITATIONS

Uses

The primary purpose of this report is to provide a ready source of understandable information about the population and performance of nursing homes. The information is most useful as a basis of inquiry, to assist in asking questions about individual facilities, trends and the enforcement process.

The information presented in this report is taken from the survey reports State surveyors fill out during their annual inspections of each nursing home that participates in Medicare and/or Medicaid. Copies of the full reports are available through the individual State survey agencies. The information describes what conditions were observed in the nursing home at the time of its most recent survey and it includes both:

- general information about a nursing home's population and the characteristics and care needs of its residents; and
- specific information about a nursing home's performance in terms of whether it was found to meet certain Federal requirements that provide some insight as to what kind of care the residents receive.

Making this information more accessible and understandable will benefit both the general public and the nursing home community. This type of information can help potential consumers first to ask knowledgeable questions of their physicians, nursing home representatives and long-term care ombudsmen and then to make informed decisions in the selection of a nursing home.

For example, the information will allow comparisons to be made among facilities as to the proportion of residents with severe skin problems, such as bed sores or other skin breakdowns. It is important to note, however, that while a high proportion of such residents might be indicative of poor quality care, it could also mean that the facility has special expertise in handling such problems and doctors refer their patients there. The consumer could then check related performance indicators (i.e., each resident receives care necessary to prevent skin breakdown; and each resident with a bed sore receives care necessary to promote the healing of the bed sore) to determine whether surveyors had identified any problems in this area and ask nursing home staff why so many residents were in need of special skin care. A subsequent section of this report (see "Further Considerations") provides an illustrative list of the types of questions that potential consumers might ask in the course of selecting a nursing home.

We expect that nursing homes, individually and as an industry, will find the information useful. It will provide information which will allow each facility to determine the health status of its residents in relation to other facilities in the State and the nation. It will also allow each facility to compare its compliance at the time of survey with the compliance of other nursing homes in the State and the nation. The information will also provide a valuable insight into the consistency of standards enforcement within a State and across the country.

Limitations

When properly understood and used, this information can be of significant value. However, responsible use of the information depends on a thorough understanding of its limitations.

First, any valid interpretation of this information must take into account the fact that the information comprises the individual judgments of more than 3,000 surveyors in 53 separate State survey agencies. Variations in the deficiency information may in part reflect differences among States and individual surveyors in how requirements are interpreted and applied, rather than genuine differences in facility performance. Similarly, care practices in the field may vary from area to area and differences in the information may reflect these variations as well.

Second, the deficiency findings are not a complete picture of the quality of care in a nursing home. Deficiency findings are a measure of compliance or non-compliance with a particular requirement, and the requirements are minimum standards that nursing homes must meet to participate in Medicare and/or Medicaid. Moreover, the information in each profile describes deficiency findings for only 32 out of more than 500 Federal regulatory requirements that are evaluated during a survey. The absence of a deficiency means that the home met the minimum standard at the time of survey, but the information cannot identify nursing homes that are providing outstanding quality care.

A third limitation stems from the periodic nature of a deficiency-based survey process. Findings are recorded in the course of the survey and thus reflect a "snapshot" of the conditions in the nursing home at that time. The information does not describe the home's success or failure in taking prompt corrective action to remedy problems. Similarly, there is no guarantee that those items in compliance with Federal requirements at the time of survey have remained in compliance.

Finally, the information reflects neither the duration nor the severity of identified deficiencies. A problem may represent a one-time failure of a single staff person, or it may represent an ongoing failure of the facility to provide acceptable quality care.

DESCRIPTION OF THE SURVEY AND CERTIFICATION PROCESS

The process of qualifying nursing homes for participation in the Medicare and/or Medicaid programs is known as the survey and certification process. Nursing homes that are approved to take part in Medicare and/or Medicaid and therefore qualified to receive Federal and State funds are required to meet standards set by Federal regulations. These standards are the way the Federal and State governments make sure that nursing homes that receive public monies provide quality care to residents. The standards are developed by the Health Care Financing Administration (HCFA), Department of Health and Human Services (DHHS). The State survey agency in each State inspects (surveys) homes to make sure they meet health, safety, and quality standards. The surveyors are State employees who use Federal forms and standards. HCFA pays States for this survey activity. Information from these surveys is stored in a centralized computer system in Baltimore, Maryland, which is the headquarters of HCFA. The information published in this report was obtained from this system.

The State survey agencies are required to inspect nursing homes at least once a year and report their findings to State and Federal officials. During a survey, a team of surveyors tours a nursing home and looks at all areas of the nursing home that affect the quality of care that residents receive. The size and composition of survey teams, as well as the duration of surveys, vary in different States and in facilities of different sizes.

Surveyors observe how care is actually given to residents. Surveyors interview a sample of the residents and review their medical records. They evaluate the preparation of meals and eating assistance techniques. They check whether residents get prescribed medications in the proper dosage at the correct times. Surveyors also review the records of nursing homes, interview nursing home staff, and observe the home for cleanliness, comfort and safety. These are some examples of what surveyors do when they inspect a nursing home.

The surveyors record their findings on Federal forms. When the survey is completed, they meet with the nursing home officials to discuss their findings. If problems were found by the surveyors, the nursing home has to submit a written plan of correction telling how it plans to correct the problems. If a nursing home is found to have problems, it is given a reasonable amount of time to correct them. State survey agencies use various methods of follow-up review, including revisiting the home to assure that the needed correction has taken place.

If the problems are serious enough to threaten the health and safety of the residents and/or a nursing home fails to correct the problems, the home will not be allowed to continue to participate in the Medicare and/or Medicaid programs. Short of this action, HCFA and the States can also employ an array of other enforcement actions to bring about compliance with State and Federal requirements. Examples of possible actions include monetary fines, bans on new admissions, transfer of residents to other facilities, or placement of the facility in a receivership (i.e., temporary government-ordered management). A description of the certification and licensure program specific to this State is provided in the following section of this report.

SOURCES OF INFORMATION

There are many sources you can go to in order to find out about a particular nursing home or about nursing homes in general. The best sources of information will likely be the State Health Department, the local or State long-term care ombudsman program or agency on aging. The ombudsman programs were established under the Older Americans Act to assist nursing home residents and those who represent them. See the "State Government" section below for information on how to contact the State ombudsman program.

Many other agencies and organizations have information on homes in order to make referrals to the public. It may be necessary to obtain information from several organizations before you find the information that you need or want.

Public and General Sources

There are many public and general sources of information on nursing homes. Some of these are:

- Social services departments in local hospitals;
- Nursing home provider associations like the American Health Care Association or the American Association of Homes for the Aging;
- State nursing home associations;
- City or county welfare departments;
- Religious groups; and
- Better Business Bureaus, local consumer protection offices, and other consumer information groups.

Others who can offer valuable advice include physicians, social workers, clergymen and friends or relatives who have placed someone in a nursing home.

State Government

The following pages give a description of the State licensure and enforcement programs. They also contain information about State government offices that you can contact to obtain information about nursing homes and about the State long-term care ombudsman program.

Arch A. Moore, Jr. Governor



David K. Heydinger, M.D. Director

State of West Virginia

DEPARTMENT OF HEALTH
CHARLESTON 26305

Overview of the Nursing Home Licensure Program

The Health Facility Licensure and Certification Section is responsible for the state licensure and Medicare/Medicaid certification activities for nursing homes and other health care facilities in the state. Facilities are rated during unannounced inspections on the basis of service provision in each of ten categories. The overall facility rating ("A" "B" "C" or "F") and each category rating is posted at the nursing home and is available from the Department of Health. Licenses are issued only after the applying facility has submitted written plans of correction for any deficiencies identified.

Overview of the Nursing Home Licensure Enforcement Section

Re-visits are made to determine whether each plan of correction has been implemented. The following sanctions are available for sub-standard nursing homes: short-term licenses; limiting the licensed bed capacity; admissions bans; civil penalties; and closure.

Resources available to Consumers and Agency to Contact

For information concerning nursing home licensure and facility certification, complaints, copies of inspection reports, list of licensed nursing homes, ownership information, or nursing home rules - John J. Jarrell, Director, HFLACS, WV Department of Health, 1800 Washington Street, E., Charleston, WV 25305. Telephone 304/348-0050

For Medicaid eligibility information - Helen M. Condry, Director, Division of Medical Care, Department of Human Services, State Capitol, Charleston, WV 25305. Telephone 304/348-8990

For complaints regarding Medicaid fraud - Eugene D. King, Chief, Division of Medicaid Fraud Control, Department of Human Services, State Capitol, Charleston, WV 25305. Telephone 304/348-0460

Information and complaints regarding Adult Protective Services - Rozella Archer, Acting Administrator, Division of Social Services, Department of Human Services, State Capitol, Charleston, WV 25305. Telephone 304/348-7980.

Information and referral, resolution of complaints and aid in securing appropriate entitlements - Susan M. Harman, Executive Director, Commission on Aging, State Capitol, Charleston, WV 25305. Telephone 304/348-2241 or call toll free at 1-800/642-3671.

OFFICE OF ADMINISTRATION AND OVERSIGHT Health Standards and Evaluation Division Health Facility Licensure and Certification

1800 WASHINGTON STREET, EAST

CHARLESTON, WEST VIRGINIA 25305

TELEPHONE (304) 348-0050

Federal Government

Some agencies of the Department of Health and Human Services (DHHS) also have information about nursing homes. These agencies are:

Office of the Inspector General (OIG)

The mission of the OIG is to maintain the integrity of DHHS' programs by investigating any reports of fraud, waste or abuse by doctors, hospitals or other providers of health care services such as nursing homes.

If you have reason to believe that a health care service provider is performing unnecessary or inappropriate services or is billing Medicare for services you did not receive, a toll-free Hot Line has been installed by the Department of Health and Human Services' Inspector General.

Toll Free Numbers

Outside Maryland: 1-(800) 368-5779 Inside Maryland: 1-(800) 638-3986

Note: Medicaid issues should first be referred to the appropriate State agency before contacting the OIG Hot Line. In most States, the State fraud and abuse units can be located through the State Office of the Attorney General.

Administration on Aging (AoA)

The mission of the AoA is to administer the programs and related provisions of the Older Americans Act in a manner which:

- 1) creates and supports a national network on aging;
- 2) develops and oversees a responsive system of services and opportunities to meet the needs of the elderly; and
- 3) serves as a visible advocate on behalf of the elderly in the entire nation.

The Regional AoA Offices listed below can help to put you in touch with the appropriate State or local authorities, depending on the nature of your inquiry or concern.

AoA Regional Offices

Regional Program Director, AoA DHHS Region I Room 2011 JFK Federal Building Boston, MA 02203 (617) 565-1158

Regional Program Director, AoA DHHS Region III 3535 Market Street P.O. Box 13716 Philadelphia, PA 19101 (215) 596-0334

Regional Program Director, AoA DHHS Region V 13th Floor 300 South Wacker Drive Chicago, IL 60606 (312) 353-3141

Regional Program Director, AoA DHHS Region VII Room 384 601 East 12th Street Kansas City, MO 64106 (816) 426-2955

Regional Program Director, AoA DHHS Region IX Room 480 Federal Office Building 50 United Nations Plaza San Francisco, CA 94102 (415) 556-6003 Regional Program Director, AoA DHHS Region II Room 4149 26 Federal Plaza New York, NY 10278 (212) 264-3472

Regional Program Director, AoA DHHS Region IV Suite 903 101 Marietta Tower Atlanta, GA 30323 (404) 331-5900

Regional Program Director, AoA DHHS Region VI Room 1000 1200 Main Tower Building Dallas, TX 75202 (214) 767-2971

Regional Program Director, AoA DHHS Region VIII Room 1185 Federal Office Building 1961 Stout Street Denver, CO 80294 (303) 844-2951

Regional Program Director, AoA DHHS Region X The Third and Broad Building 2901 Third Avenue Seattle, WA 98121 (206) 442-5341

Office for Civil Rights (OCR)

The mission of OCR is to enforce civil rights statutes that prohibit discrimination in DHHS' programs and to generate voluntary compliance. You may wish to contact an OCR office to report incidents of discrimination by a nursing home or to check on a facility's previous record in this regard.

OCR Regional Offices

Director, OCR DHHS Region I Room 2403 JFK Federal Building Boston, MA 02203 (617) 565-1340

Director, OCR
DHHS Region III
Room 6300
3535 Market Street
P.O. Box 13716
Philadelphia, PA 19101
(215) 596-1262

Director, OCR DHHS Region V 33rd Floor 300 South Wacker Drive Chicago, IL 60606 (312) 353-2520

Director, OCR
DHHS Region VII
Room 248
601 East 12th Street
Kansas City, MO 64106
(816) 426-7277

Director, OCR
DHHS Region IX
Room 322
Federal Office Building
50 United Nations Plaza
San Francisco, CA 94102
(415) 556-8586

Director, OCR DHHS Region II Room 3312 26 Federal Plaza New York, NY 10278 (212) 264-3313

Director, OCR DHHS Region IV Room 1502 101 Marietta Tower Atlanta, GA 30323 (404) 331-2779

Director, OCR DHHS Region VI Room 1360 1200 Main Tower Building Dallas, TX 75202 (214) 767-4056

Director, OCR
DHHS Region VIII
Room 844
Federal Office Building
1961 Stout Street
Denver, CO 80294
(303) 844-2024

Director, OCR DHHS Region X The Third and Broad Building 2901 Third Avenue Seattle, WA 98121 (206) 442-0473

Health Care Financing Administration (HCFA)

The mission of HCFA is to administer the Medicare and Medicaid programs in a manner which promotes:

- 1) quality health care to eligible beneficiaries;
- 2) awareness of the services for which beneficiaries are eligible; and
- 3) efficiency and quality within the total health care delivery system.

Listed below are the HCFA offices responsible for overseeing the State survey and certification programs:

HCFA Regional Offices

Associate Regional Administrator DHHS Region I, HCFA Division of Health Standards and Quality Room 1309 JFK Federal Building Boston, MA 02203 (617) 565-1331

Associate Regional Administrator DHHS Region III, HCFA Division of Health Standards and Quality 3535 Market Street P.O. Box 7760 Philadelphia, PA 19101 (215) 596-0997

Associate Regional Administrator DHHS Region V, HCFA Division of Health Standards and Quality Room 941 175 West Jackson Boulevard Chicago, IL 60604 (312) 353-9804

Associate Regional Administrator DHHS Region VII, HCFA Division of Health Standards and Quality Room 284 601 East 12th Street Kansas City, MO 64106 (816) 374-2408

Associate Regional Administrator DHHS Region IX, HCFA Division of Health Standards and Quality 100 Van Ness Avenue San Francisco, CA 94102 (415) 556-0041 Associate Regional Administrator DHHS Region II, HCFA Division of Health Standards and Quality Room 3821 26 Federal Plaza New York, NY 10278 (212) 264-3219

Associate Regional Administrator DHHS Region IV, HCFA Division of Health Standards and Quality Suite 601 101 Marietta Tower Atlanta, GA 30323 (404) 331-2488

Associate Regional Administrator DHHS Region VI, HCFA Division of Health Standards and Quality Room 2000 1200 Main Tower Building Dallas, TX 75202 (214) 767-6301

Associate Regional Administrator DHHS Region VIII, HCFA Division of Health Standards and Quality Room 1194 Federal Office Building 1961 Stout Street Denver, CO 80294 (303) 844-4721

Associate Regional Administrator DHHS Region X, HCFA Division of Health Standards and Quality 2901 Third Avenue Seattle, WA 98121 (206) 442-0511 If you wish to contact any of the DHHS agencies, the following list outlines which DHHS regional office has responsibility for your State.

Region I/Boston

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Region III/Philadelphia

Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia

Region V/Chicago

Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

Region VII/Kansas City

Iowa, Kansas, Missouri, and Nebraska

Region IX/San Francisco

Arizona, California, Hawaii, Nevada, American Samoa, and Guam

Region II/New York

New Jersey, New York, Puerto Rico, and Virgin Islands

Region IV/Atlanta

Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee

Region VI/Dallas

Arkansas, Louisiana, New Mexico, Oklahoma, and Texas

Region VIII/Denver

Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming

Region X/Seattle

Alaska, Idaho, Oregon, and Washington

FURTHER CONSIDERATIONS

The information presented in this report can be an important source for potential nursing home consumers and their families to consult during the process of selecting a nursing home. It is also important that potential consumers and their families ask questions of their physicians, nursing home personnel and consumer representatives (such as local long-term care ombudsmen) to help guide them in selecting the best possible facility to meet their needs. The best way to find out about a nursing home is to take the time to visit the home in person, if possible, before you make your choice.

Listed below are some examples of the kinds of questions that potential nursing home consumers should ask before selecting a home and some things you should do to find out about the home during your visit. These questions are intended to augment the information contained in this report. Keep in mind that they are not a comprehensive list but an illustrative list of suggested issues that should be considered in choosing a nursing home.

General

- Find out who owns the home and whether it is approved for participation in the Medicare or Medicaid programs.
- Make an appointment to visit the home. Meet with the administrator, the director of nursing and the director of social services and ask them about the history of the home and the services it offers.
- Ask about the home's last survey, what problems were found and if and how they have been
 corrected. Ask whether the facility has been surveyed since the survey described in this report.
 You can ask to see the survey results.
- Ask whether the State has initiated any punitive actions against the home in the last 2 years, and if so, what actions were taken and how they were resolved. You may want to verify this information through other sources such as the State nursing home ombudsman.
- Ask about the home's admission policies and ask for a copy of any admission agreement that is required.
- Ask to see a copy of the home's residents' rights policy. Does the facility have any special programs/procedures to help educate residents and staff about their rights? You can observe for yourself during your visit how well the home is honoring these rights.
- Ask about the home's basic daily rate and what is included in the charges. Also ask how the home handles residents' personal funds, if such assistance is necessary.
- Find out about the home's visiting hours and what choices residents have as to the time they can get up, eat and go to bed.
- See if residents look well cared for and properly groomed. Do staff treat the residents with courtesy and respect? If the opportunity arises, chat with a resident or two to get their impressions.
- Find out if the home has an organized resident council or other type of resident group. How often does it meet and what are some of its activities and accomplishments? Also, is there an organized family council that family members can participate in?

Physical Environment

- Ask for a tour of the facility and try to see all the major areas of the home, including dining areas and some residents' rooms.
- Note whether the home is an attractive, clean and comfortable place to be. Is it well-lit and ventilated and free of potential health hazards such as obstacles in hallways or underfoot? Is it free from insects and rodents?
- Look at the residents' lounge and other common areas and see if they look comfortable and whether they are used by residents. Do residents have the opportunity to sit outdoors in comfortable, safe surroundings?
- Check toilet and bathing facilities and note whether they are clean, sanitary and reasonably free of odors. Are they easily accessible to handicapped residents?
- Note whether residents' rooms have windows and access to the corridor. Does each resident have a reading light, comfortable chair, sufficient closet space? How many people are in each room and are there privacy curtains?

Medical and Nursing Services

- Find out how medical care and direction is provided in the facility. Who is the medical director? Will a resident's personal physician be able to visit as needed, and cooperate with the medical director? What happens if hospital or emergency care is needed?
- Ask if the home specializes in providing any particular type of medical care. Be sure to inquire about how the home cares for residents who share your particular medical problems or care needs.
- Ask about the availability of specialized care to restore physical abilities lost due to illness or injury. Physical therapy, speech therapy and occupational therapy are examples of this type of specialized care.
- Ask how many registered nurses and licensed practical nurses are employed by the home and how many of each are on duty during days, evenings, nights and weekends. How many residents are under the care of each type of nurse?
- Ask how often a resident's medication schedule is reviewed for possible dosage reductions, adverse interactions or reactions, or expirations. Who is accountable for pharmaceutical services?
- Ask how the home provides dental care to its residents.

Food

- Ask at what times meals are served and whether snacks are available. Ask to see the menus for a week. Are substitutions readily available?
- Observe how food is served. Does it look appetizing? Do residents appear to be enjoying their meals?

Social Services and Activities

- Ask to see the schedule of activities for a week. Does the facility have a varied activities program suitable for residents with different interests and capabilities?
- Ask if there is an activities coordinator and see if there is suitable space available for activities.
- Find out whether the facility has a full-time social services director and ask what social services and mental health and other counseling services are available to residents and their families. Does the facility have specialized services/programs available for residents with special disorders and disabilities, including Alzheimer's Disease?

GLOSSARY OF TERMS

Resident Characteristics and Facility Performance Indicators

This glossary contains terms used to describe certain common features or characteristics of people who enter nursing facilities and common features or indicators of how well the facility provides quality care.

Bed Sore. A bed sore is an open sore that occurs more often to a resident with little muscle tissue or fat and who remains in one position for a long period of time. A bed sore may form on bony areas, such as at the base of the spine, heels, and ankles. Other names for a bed sore are "pressure sore" or "decubitus."

Catheter. See Urinary Catheter.

Colostomy or Ileostomy. A resident who has serious intestinal difficulties may have surgery which creates an artificial opening at the abdomen for bowel movements. Colostomy or ileostomy care involves keeping the skin around the colostomy or ileostomy clean and free from sores. For a resident who wears a bag to collect bowel movements, care also involves emptying the bag regularly and keeping the bag free of odor.

Fluids Supplied Through Tubes. A resident who cannot eat enough food to stay healthy may receive nourishment in the form of fluids prescribed by a physician. These fluids are usually given by inserting a needle or a tube into a vein. Care involves making sure that the needle or tube stays free of germs and that it stays in the vein.

Incompetent. A resident who cannot make decisions because of impairments in mental ability may be called incompetent. This is often a legal term meaning a court has decided that the person cannot make decisions, but it is also used as a descriptive term.

Injections. Medicine given by inserting a needle into muscle or tissue.

Isolation Techniques. These are methods to ensure that infection does not spread from one part of a resident's body to another, or from one resident to another.

Rehabilitative Bowel and Bladder Training. A resident with difficulty controlling bowel or bladder may participate in a program to learn to control these functions.

Respiratory Care. A resident who has trouble breathing may need assistance which may be given by breathing in extra oxygen or receiving medication. Respiratory care involves giving the amount of oxygen or medication in the way and in the amount that the doctor has ordered.

Restraints. Residents who need to be protected from hurting themselves or others may need to be restrained. One type of restraint is physical. For example, to keep a resident from falling out of a wheelchair a physician may prescribe a cloth protective device or a vest. Drugs (medications) may also be provided to treat and modify a resident's physically aggressive behavior. However, medications must be prescribed in doses and for a length of time necessary to treat symptoms.

Skin Breakdown. When a resident remains in one position for a long period of time, his or her skin may be damaged. One of the first signals that this is happening is that reddened areas appear on the places where the resident has placed pressure from sitting in a chair or lying in bed. These reddened areas do not go away even after the positioning of the resident has been changed. If special care is not given, bed sores may develop. See **Bed Sore**.

Suctioning. A resident who is unable to cough up fluids or mucus in the air passages may have a tube inserted into the air passages to suck the fluids out. Care involves making sure that the fluids are removed as often as necessary and that the tube used is always free of germs.

Tracheotomy Care. A resident who has difficulty breathing may have an operation which makes a breathing passage from the base of the neck into the lungs. This opening is called a tracheotomy. Care involves keeping the breathing passage clean and free from congestion.

Transferring. This term has two meanings. First, it is used to describe the extent to which a resident is dependent on others to move from bed to chair, bed to toilet, chair to bath, etc. Transferring is also used to describe moving from one section of a facility to another or from one facility to another.

Urinary Catheter. A tube inserted into the bladder to remove urine.

HOW TO READ THE INFORMATION

Before reading the individual nursing home profiles that make up this report, it would be helpful to understand the format and presentation of the information in each profile.

		ME PROFILE Nursing Home	
Street Address:		City and State:	
Participation:	# of Beds:	Type of Ownership:	Survey Date:

The first 3 lines of the profile contain basic information about each nursing home. Following is an explanation of the items included:

Name: Self Street Address: Self City and State: Self

Self-explanatory Self-explanatory

Self-explanatory

Participation: The information in this block indicates whether the nursing home participates in the Medicare program, the Medicaid program, or both programs. In addition, this block identifies the level of care that the nursing home provides. These include:

Skilled Nursing Facility (SNF)—A nursing home which provides the level of care that comes closest to hospital care with 24-hour nursing services. Regular medical supervision and rehabilitation therapy are also provided. Generally, a skilled nursing facility cares for convalescent patients and those with long-term illnesses.

Intermediate Care Facility (ICF)—A nursing home which provides less extensive health related care and services. It has regular nursing service, but not around the clock. Most intermediate care facilities carry on rehabilitation programs, with an emphasis on personal care and social services. Mainly, these homes serve people who are not fully capable of living by themselves, yet are not necessarily ill enough to need 24-hour nursing care.

Many nursing homes participate in both the Medicare and Medicaid programs, and qualify as both skilled nursing facilities and intermediate care facilities.

Number of Beds: This is the total number of beds in the nursing home, including those that are approved for Medicare and Medicaid and those that are not. Many nursing homes have beds that are "private;" these are included in the number even though the facility does not receive Medicare or Medicaid money for them.

Type of Ownership: This block describes the type of organization that operates the nursing home. These include:

Non-profit-religious—A nursing home affiliated with a religious organization, governed by a board of directors and financed largely by contributions.

Non-profit-private—A nursing home not affiliated with a religious or a community based organization and financed largely by contributions.

Non-profit-other—A nursing home which is generally governed by a community based board of directors and financed largely by contributions.

Proprietary—A nursing home operated for profit.

Government—A nursing home primarily administered by the Federal government, the State, or the county, city or other local unit of government.

Survey Date: The day on which the nursing home inspection described in this report was completed. All of the information contained in the nursing home profile reflects the conditions on this date. Note that surveys are being conducted on an ongoing basis, and thus, more recent survey results may become available subsequent to publication of this report

EXAMPLE -SELECTED RESIDENT CHARACTERISTICS Medicare Residents: Medicaid Residents: Total Residents on Day of Survey: **FACILITY** STATE NATION Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services. % # % % Bathing Residents requiring some or total assistance in bathing. 78 83.0 81.0 81.0

The "Selected Resident Characteristics" section of the profile contains important information describing the population of the nursing home. Surveyors obtain this information from the facility at the time of survey. The first line of this section shows the total number of residents living in the home and indicates how many of the home's residents are Medicare or Medicaid recipients. Next, the profile tells how many of the nursing home's residents fall into each of 13 selected care categories. These categories reflect common characteristics of nursing home residents that relate to the amount and types of care that they need. They describe the degree of assistance required by residents in carrying out the basic activities of daily living (e.g., bathing, dressing, eating) as well as other characteristics that provide information on the health care needs of residents (e.g., residents who are unable to get out of bed without assistance, residents with special skin care needs, residents on bowel and bladder retraining programs.)

The example above shows the first care category included in each nursing home profile, "Bathing." Following is an explanation of information provided in the profile:

Column 1—Facility, #: Indicates that 78 residents of the nursing home require some or total assistance in bathing.

Column 2—Facility, %: Indicates that the 78 residents who require assistance in bathing represent 83% of the nursing home's total population.

Column 3—State, %: Indicates that, in the State where the nursing home is located, 81% of all skilled nursing facility residents require assistance in bathing.

Column 4—Nation, %: Indicates that, for the nation as a whole, 81% of all skilled nursing facility residents require assistance in bathing.

The profile then provides similar information for each of the remaining care categories. Note that many residents will be included in more than one of the care categories.

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"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STA #	ATE %	NAT #	ION %	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	6	5.0	489	5.0	

The last section of the profile "Selected Performance Indicators," tells about the nursing home's performance in meeting Federal quality of care requirements. The profile includes 32 performance indicators selected for their usefulness in describing important aspects of a nursing home's performance. Each indicator is based on a specific regulatory requirement that nursing homes must meet to participate in Medicare or Medicaid.

As shown in the example above, the profile indicates for each performance indicator whether the nursing home met or did not meet minimum Federal requirements on the date of its most recent inspection by State surveyors. Following is an explanation of the information provided in the sample profile for the first performance indicator, "The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed."

Column 1—Facility Met/Not Met: Shows either "Met" or "Not Met." "Met" means that the nursing home performed satisfactorily in this area. "Not Met" would mean that the home did not perform satisfactorily in this area.

Column 2—State, #: Indicates that there were 6 skilled nursing facilities in the State that did not perform satisfactorily in this area.

Column 3—State, %: Indicates that the 6 facilities that did not perform satisfactorily represent 5% of the skilled nursing facilities in the State.

Column 4—Nation, #: Indicates that there were 489 skilled nursing facilities in the nation that did not perform satisfactorily in this area.

Column 5—Nation, %: Indicates that the 489 facilities that did not perform satisfactorily represent 5% of all skilled nursing facilities in the nation.



NURSING HOME PROFILE ANSTED HLTH CARE CTR

	ANS IED ILLI	II CANE CIN	
Street Address:		City and State:	
P O DRAWER B		ANSTED WV 25812	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	02/10/88

SELECTED RESIDENT CHARACTERISTICS

SEELOTE	RESIDENT CHARACTERIST	100				
Total Residents on Day of Survey:	Medicare Residents:	Medic	Medicaid Residents:			
59	0	54				
Caution: A large number of residents with these chara	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reliect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	52	88.1	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	44	74.6	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting	28	47.5	77.5	63.4	
Transferring	and in tonothig.		1			
Residents requiring some or total assistance moving from bed to chair or to			00.1	00.0	66.0	
tub or toilet. Continence	52	88.1	80.9	66.0		
Residents with catheters or partial or to	tal loss of bowel or bladder control.	43	72.9	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1	
Eating						
Residents receiving tube feedings or re	quiring assistance with eating.	16	27.1	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		26	44.1	49.4	39.1	
Tionanto comme to chans.						
Decidente veguinine vestueinte		18	30.5	43.7	31.7	
Residents requiring restraints.		10	30.5	40.7	01.7	
			40.7	00.5	55.0	
Confused or disoriented residents.		24	40.7	62.5	55.8	
Residents with bed sores.		2	3.4	5.6	4.7	
Residents receiving special skin care.		15	25.4	29.2	24.0	

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				OF FACILITIES JIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.		1	1.4	GE.	1.0	
	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	мет	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

					011 17150	
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
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Reminder: The results of the full survey are available from the State survey agency or the State ombudsman.

NURSING HOME PROFILE E A HAWSE CONTNU CARE CNTR

Street Address:		City and State:	
PO BOX 37 RTS 259 55		BAKER WV 26801	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	01/15/88

SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
58	0				
Caution: A large number of residents with these chara-	cteristics does not indicate whether those	FAC	ILITY	4 STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	58	100	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	57	98.3	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	37	63.8	77.5	63.4
Transferring					
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.			96.6	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			96.6	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	2	3.4	5.6	6.1
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	17	29.3	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		42	72.4	49.4	39.1
Residents requiring restraints.		26	44.8	43.7	31.7
Confused or disoriented residents.		36	62.1	62.5	55.8
Post to decide the decide to		1	1.7	5.6	4.7
Residents with bed sores.		1	1.7	5.0	4.7
Desidents receiving avertel state as		12	20.7	29.2	24.0
Residents receiving special skin care.		12	20.7	23.2	24.0

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

was deficient in the indicated area at the time of the survey.						
eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented blow does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF NOT MEETING REQUIRE				
	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

OLLEGIES I EIII OIIMANGE INDIGA	10110				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.		13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.		0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.		5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

Reminder: The results of the full survey are available from the State survey agency or the State ombudsman.

NURSING HOME PROFILE AMERICARE PINE LODGE NSG & REHAB CTR

Street Address:

405 STANAFORD RD

BECKLEY WV 25801

Participation: # of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

120 PROPRIETARY

01/08/88

SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
96	0	62			
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FACILITY STATE NA		NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	95	99.0	84.9	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	92	95.8	90.0	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	92	95.8	85.1	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	77	80.2	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	72	75.0	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	6	6.3	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	42	43.8	47.4	37.7
Completely bedfast residents.		2	2.1	2.9	3.4
Residents confined to chairs.		47	49.0	58.4	50.8
Residents requiring restraints.		47	49.0	51.1	41.3
Confused or disoriented residents.		32	33.3	63.4	58.4
Residents with bed sores.		0	0.0	6.8	7.1
Residents receiving special skin care.		0	0.0	33.4	31.2

"Facility" column indicates deficiencies found at the time of survey. The Federal Government requires facilities to correct deficiencies immediately or to submit a plan indicating deficiencies will be corrected within a reasonable period of time. "State" and "Nation" columns indicate number and percentage of occurrence of deficiencies in other facilities in the State and Nation. "Met" means that the facility is in compliance with the specific requirement. "Not Met" means the facility was deficient in the indicated area at the time of the survey.

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
deficiency may represent an originity problem of a one-time radiuse of a single stan person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	МЕТ	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8
•					

Reminder: The results of the full survey are available from the State survey agency or the State ombudsman.

NURSING HOME PROFILE HEARTLAND OF BECKLEY

Street Address:		City and State:	
300 DRY HILL ROAD		BECKLEY WV 25801	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	220	PROPRIETARY	08/28/87

SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
157	0	142				
Caution: A large number of residents with these characteristics are residents.		FACILITY STATE		STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reliect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	148	94.3	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	146	93.0	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	123	78.3	77.5	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	149	94.9	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	116	73.9	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	36	22.9	5.6	6.1	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	82	52.2	32.4	29.3	
Completely bedfast residents.		4	2.5	1.8	3.6	
Residents confined to chairs.		99	63.1	49.4	39.1	
Residents requiring restraints.		75	47.8	43.7	31.7	
Confused or disoriented residents.		85	54.1	62.5	55.8	
Residents with bed sores.		6	3.8	5.6	4.7	
Residents receiving special skin care.		60	38.2	29.2	24.0	

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	STATE		ION	
		#	/ · · ·	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	NOT MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	
			-			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT MET	STATE		NATION	
ficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	, .11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE PINECREST HOSPITAL ICF

Street Address:		City and State:				
RT 19-21 BYPASS		BECKLEY WV 25801				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	199	STATE GOVERNMENT	09/22/87			

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
107	0		9	4	
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	107	100	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	99	92.5	86.8	76.7
Toileting Toileting	<u> </u>				
Residents requiring some or total assista	ance in toileting.	96	89.7	77.5	63.4
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	91	85.0	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			87.9	71.8	59.1
	.				
Residents on individually written bowel a	and bladder retraining program.	5	4.7	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	58	54.2	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		90	84.1	49.4	39.1
Residents requiring restraints.		49	45.8	43.7	31.7
*					
Confused or disoriented residents.		45	42.1	62.5	55.8
Residents with bed sores.		3	2.8	5.6	4.7
Residents receiving special skin care.		82	76.6	29.2	24.0

was deficient in the indicated area at the time of the survey.	_,				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FA			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	TE NAT	
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FAC NOT MEETING REOUIREME			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		TAN	ION
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE

JONES HONSING HOME							
Street Address:		City and State:					
444 HILL ST		BEECH BOTTOM WV 2603	30				
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	30	PROPRIETARY	02/27/87				

SELECTE	D RESIDENT CHARACTERIST	TCS			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
29	0		2	23	
Caution: A large number of residents with these chara	acteristics does not indicate whether those	FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate can highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assis	tance in bathing.	22	75.9	83.2	78.3
Dressing					
Residents requiring some or total assis	tance in dressing.	24	82.8	86.8	76.7
Toileting					
Residents requiring some or total assis	tance in toileting.	26	89.7	77.5	63.4
Transferring					
Residents requiring some or total assis tub or toilet.	tance moving from bed to chair or to	24	82.8	80.9	66.0
Continence					
Residents with catheters or partial or to	otal loss of bowel or bladder control.	26	89.7	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or re	quiring assistance with eating.	7	24.1	32.4	29.3
Completely bedfast residents.		1	3.4	1.8	3.6
Residents confined to chairs.		15	51.7	49.4	39.1
Residents requiring restraints.		12	41.4	43.7	31.7
Confused or disoriented residents.		14	48.3	62.5	55.8
Residents with bed sores.		5	17.2	5.6	4.7
Residents receiving special skin care.		5	17.2	29.2	24.0

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	NOT MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
			•	•	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS					
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT			
	MET	#	%	#	%		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0		
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8		
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4		
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4		
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0		
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0		
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8		
		L	L				

NURSING HOME PROFILE BARBOUR CO GOOD SAMARITAN CTR

Street Address:		City and State:	
POB 518		BELINGTON WV 26250	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	NON-PROFIT OTHER	04/16/87

SELECTEL	RESIDENT CHARACTERIST	105			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
59	0	49		.9	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate can highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	55	93.2	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	47	79.7	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	41	69.5	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	41	69.5	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			69.5	71.8	59.1
Residents on individually written bowel and bladder retraining program.		0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	14	23.7	32.4	29.3
Completely bedfast residents.		12	20.3	1.8	3.6
Residents confined to chairs.		21	35.6	49.4	39.1
Residents requiring restraints.		27	45.8	43.7	31.7
•					
Confused or disoriented residents.		53	89.8	62.5	55.8
Residents with bed sores.		4	6.8	5.6	4.7
Residents receiving special skin care.		9	15.3	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NATION	
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	МЕТ	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	%	#	%
and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical	MET	1	1.4	255	4.7
functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE CARE HAVEN OF PLEASANTS

Street Address:		City and State:	
PO BOX 625		BELMONT WV 26134	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	08/04/87

SELECTE	RESIDENT CHARACTERIST	ics				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
6	0			0		
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car	acteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may renect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	tance in bathing.	5	83.3	83.2	78.3	
Dressing						
Residents requiring some or total assist	tance in dressing.	5	83.3	86.8	76.7	
Toileting						
Residents requiring some or total assist	tance in toileting.	5	83.3	77.5	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	tance moving from bed to chair or to	5	83.3	80.9	66.0	
Continence						
Residents with catheters or partial or to	stal loss of bowel or bladder control	4	66.7	71.8	59.1	
ricoldenia with editional of partial of to	tal 1000 of Bower of Staddor Control.					
Residents on individually written bowel	and bladder retraining program	0	0.0	5.6	6.1	
Eating	and bladder retraining program.		0.0	0.0		
•	avising anniatanes with asting	2	33.3	32.4	29.3	
Residents receiving tube feedings or re	quilling assistance with eating.		30.0	32.4	25.0	
Commission to the Association		1	16.7	1.8	3.6	
Completely bedfast residents.		1	10.7	1.0	3.0	
			00.0	40.4	00.4	
Residents confined to chairs.		2	33.3	49.4	39.1	
				40.7	0.4.7	
Residents requiring restraints.		2	33.3	43.7	31.7	
Confused or disoriented residents.		3	50.0	62.5	55.8	
Residents with bed sores.		0	0.0	5.6	4.7	
Residents receiving special skin care.		5	83.3	29.2	24.0	

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCI		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	% %	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8
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NURSING HOME PROFILE VALLEY VIEW NRSG HM

Street Address:		City and State:	
ROUTE 3 BOX 277A		BERKELEY SPRINGS WV 25411	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	122	PROPRIETARY	08/21/87

Total Residents on Day of Survey:	RESIDENT CHARACTERIST Medicare Residents:		aid Resid	dente			
· ·	medicale residents.	Medicaid Residents:					
119	0			8			
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate can			ILITY	STATE	NATION		
highly specialized care and services.		#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	108	90.8	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	111	93.3	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	102	85.7	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	64	53.8	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	108	90.8	71.8	59.1		
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	61	51.3	32.4	29.3		
Completely bedfast residents.		2	1.7	1.8	3.6		
Residents confined to chairs.		82	68.9	49.4	39.1		
Residents requiring restraints.		73	61.3	43.7	31.7		
residents requiring residents.							
		90	74.0	60.5	EE 0		
Confused or disoriented residents.		89	74.8	62.5	55.8		
Residents with bed sores.		0	0.0	5.6	4.7		
Residents receiving special skin care.		13	10.9	29.2	24.0		

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	F FACILITIES REMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NATION		
		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING DEG					
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	ION		
		#	%	#	%		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0		
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8		
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4		
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4		
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0		
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0		
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8		

NURSING HOME PROFILE CUMBERLAND CARE CTR INC

Street Address:		City and State:	
ROGERS PEARIS STS		BLUEFIELD WV 24701	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNE/ICE	105	DDODDIETADV	11/12/07

Total Residents on Day of Survey:	Medicare Residents:		oid Book	donto		
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
104 0		74				
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car			ILITY	STATE	NATION	
highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	104	100	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	89	85.6	90.0	83.2	
Toileting	<u> </u>					
Residents requiring some or total assist	ance in toileting.	83	79.8	85.1	73.8	
Transferring	and m tenething.					
Residents requiring some or total assist	ance moving from bed to chair or to	00	04.6	07.0	77.0	
tub or toilet.		88	84.6	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	76	73.1	76.9	68.2	
Residents on individually written bowel	and bladder retraining program.	5	4.8	5.2	4.6	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	40	38.5	47.4	37.7	
Completely bedfast residents.		2	1.9	2.9	3.4	
Residents confined to chairs.		70	67.3	58.4	50.8	
Residents requiring restraints.		33	31.7	51.1	41.3	
Confused or disoriented residents.		63	60.6	63.4	58.4	
zemzes er aleensmen regiseriter	-					
Residents with bed sores.		6	5.8	6.8	7.1	
nesidents with Deu Sofes.		-	- 3.0	3.0	1	
		104	100	20.4	04.0	
Residents receiving special skin care.		104	100	33.4	31.2	

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING DEGI				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2 .2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			TION	
Each resident receives proper care for injections (shots), fluids supplied through	MET	#	%	#	%	
tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	

NURSING HOME PROFILE GLENWOOD PARK METHODIST HOME

Street Address:	ddress: City and State:			
ROUTE 1		BLUEFIELD WV 24701		
Participation:	# of Beds:	Type of Ownership:	Survey Date:	
MEDICARE/MEDICAID SNF/ICF	118	NON-PROFIT RELIGIOUS	01/24/88	

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
61	0		2	28	
Caution: A large number of residents with these characteristics		FACILITY		STATE	NATIO
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	59	96.7	84.9	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	59	96.7	90.0	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	55	90.2	85.1	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	60	98.4	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	39	63.9	76.9	68.2
Residents on individually written bowel a	and bladder retraining program	2	3.3	5.2	4.6
Eating	and bladder retaining program.				
Residents receiving tube feedings or rec	nuiring assistance with eating	42	68.9	47.4	37.7
	,g				
Completely bedfast residents.		1	1.6	2.9	3.4
Residents confined to chairs.		36	59.0	58.4	50.8
Residents requiring restraints.		35	57.4	51.1	41.3
-					
Confused or disoriented residents.		23	37.7	63.4	58.4
Residents with bed sores.		4	6.6	6.8	7.1
Residents receiving special skin care.		61	100	33.4	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		NUMBER & PERCE NOT MEETING (
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
		-			

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY MET/	NOT MEETING DECUMENTS					
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A							
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		NATION %			
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6		
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	. MET	8	17.4	816	8.6		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4		
Toilet and bath facilities are clean, sanitary, and free of odors.	МЕТ	12	26.1	1216	12.9		
All common resident areas are clean, sanitary and free of odors.	МЕТ	11	23.9	1041	11.0		
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9		
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9		
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8		

NURSING HOME PROFILE THE MAPLES NURSING HOME

Street Address:		City and State:	
1600 BLAND STREET		BLUEFIELD WV 24701	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	01/14/88

SELECTE	D RESIDENT CHARACTERIST	ICS					
Total Residents on Day of Survey:	Medicare Residents:	Medic					
31	0	26		0 26		26	
Caution: A large number of residents with these chair	racteristics does not indicate whether those	FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate can highly specialized care and services.	are. It may reliect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assis	stance in bathing.	31	100	83.2	78.3		
Dressing							
Residents requiring some or total assis	stance in dressing.	29	93.5	86.8	76.7		
Toileting							
Residents requiring some or total assis	stance in toileting.	27	87.1	77.5	63.4		
Transferring							
Residents requiring some or total assistable tub or toilet.	stance moving from bed to chair or to	31	100	80.9	66.0		
Continence							
Residents with catheters or partial or t	otal loss of bowel or bladder control.	23	74.2	71.8	59.1		
					·		
Residents on individually written bowe	I and bladder retraining program.	0	0.0	5.6	6.1		
Eating							
Residents receiving tube feedings or r	equiring assistance with eating.	10	32.3	32.4	29.3		
<u> </u>							
Completely bedfast residents.		1	3.2	1.8	3.6		
Residents confined to chairs.		9	29.0	49.4	39.1		
Residents requiring restraints.		17	54.8	43.7	31.7		
1 3							
Confused or disoriented residents.		8	25.8	62.5	55.8		
Residents with bed sores.		2	6.5	5.6	4.7		
Residents receiving special skin care.		31	100	29.2	24.0		
			1	1	1		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	Y NUMBER & PERCENT OF NOT MEETING REQUIR				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	МЕТ	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	мет	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

	FACILITY				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NATION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	# 1	1.4	255	4.7
and tube feeding.	MET		1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	МЕТ	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8
			-		

NURSING HOME PROFILE MEADOWVIEW MANOR HLTH CARE CNTR

Street Address:		City and State:	
41 CRESTVIEW TERR		BRIDGEPORT WV 26330	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	08/27/87

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
58 0			4	5	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	34	58.6	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	46	79.3	86.8	76.7
Toileting	-				
Residents requiring some or total assist	ance in toileting.	32	55.2	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	40	69.0	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	34	58.6	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	2	3.4	5.6	6.1
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	17	29.3	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		37	63.8	49.4	39.1
Residents requiring restraints.		19	32.8	43.7	31.7
-					
Confused or disoriented residents.		32	55.2	62.5	55.8
Residents with bed sores.		3	5.2	5.6	4.7
	·				
Residents receiving special skin care.		16	27.6	29.2	24.0
		1	1		1

was deficient in the indicated area at the time of the survey.	т .				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	T STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.		1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	МЕТ	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

eminder: These 32 selected performance indicators do not represent all the requirements a		NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS				
facility must meet. There are over 500 separate requirements. The information presented	MET/	NOT MEETING REOUIF			IREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	NAT		
deficiency may represent an origonity problem of a one-time randre of a single stan person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	11	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
Pominder: The results of the full ourses are qualified			•	•		

NURSING HOME PROFILE THE HERITAGE INC

	IHE HEKI	IAGE INC	
Street Address:		City and State:	
ROUTE 3 BOX 17		BRIDGEPORT WV 26330	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	51	PROPRIETARY	02/04/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
50	3		1	5		
Caution: A large number of residents with these chara	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	4	8.0	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	46	92.0	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	40	80.0	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	50	100	87.3	77.2		
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		36	72.0	76.9	68.2	
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or re	quiring assistance with eating.	17	34.0	47.4	37.7	
Completely bedfast residents.		0	0.0	2.9	3.4	
Residents confined to chairs.		16	32.0	58.4	50.8	
Residents requiring restraints.		29	58.0	51.1	41.3	
Confused or disoriented residents.		27	54.0	63.4	58.4	
	5 - 196					
Residents with bed sores.		0	0.0	6.8	7.1	
Residents receiving special skin care.		15	30.0	33.4	31.2	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NA	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	МЕТ	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.						

NURSING HOME PROFILE HOLBROOK ON THE HILL

Street Address:

346 SO FLORIDA ST

BUCKHANNON WV 26201

Participation: # of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

120

PROPRIETARY

08/06/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
109	3		7	6	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	19	17.4	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	93	85.3	90.0	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	94	86.2	85.1	73.8
Transferring	-				
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	89	81.7	87.3	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		92	84.4	76.9	68.2
Transfer Will Salitation of Parista 5.15	au 1000 d. 20 voi d. 21 audus. Goi violi				
Residents on individually written bowel	and bladder retraining program	2	1.8	5.2	4.6
Eating	and bladder retraining program.	_		0.2	
Residents receiving tube feedings or rec	quiring assistance with esting	49	45.0	47.4	37.7
Tresidents receiving tube recallings of rec	quilling assistance with eating.	10	10.0	17.1	07.7
Completely bedfast residents.		3	2.8	2.9	3.4
edilpiciciy bediast residents.					
Residents confined to chairs.		20	18.3	58.4	50.8
nesidents commed to chairs.		20	10.0	00.4	00.0
Posidents requiring restraints		27	24.8	51.1	41.3
Residents requiring restraints.			21.0		11.0
Confused or disoriented residents.		84	77.1	63.4	58.4
confused or disoriented residents.		04	77.1	00.4	30.4
Paridonts with had		7	6.4	6.8	7.1
Residents with bed sores.		· ·	0.4	0.8	7.1
		00	21.1	22.4	21.0
Residents receiving special skin care.		23	21.1	33.4	31.2

was deficient in the indicated area at the time of the survey.	· · · · · · · · · · · · · · · · · · ·					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			& PERCENT OF FACILITIES EETING REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	

NURSING HOME PROFILE ST JOSEPHS HOSP

Street Address: City and State:						
Street Address:		City and State:				
AMALIA DRIVE		BUCKHANNON WV 26201				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICARE/MEDICAID SNF/ICF	16	NON-PROFIT OTHER	10/16/87			

	RESIDENT CHARACTERIST	100			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
15	1	3			
Caution: A large number of residents with these chara-	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	15	100	84.9	81.5
Dressing			-		
Residents requiring some or total assistance in dressing.		12	80.0	90.0	83.2
Toileting	3				
Residents requiring some or total assist	ance in toileting.	12	80.0	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	15	100	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	12	80.0	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	13	86.7	47.4	37.7
Completely bedfast residents.		2	13.3	2.9	3.4
Residents confined to chairs.		7	46.7	58.4	50.8
Residents requiring restraints.		8	53.3	51.1	41.3
Confused or disoriented residents.		10	66.7	63.4	58.4
Residents with bed sores.		2	13.3	6.8	7.1
Residents receiving special skin care.		2	13.3	33.4	31.2

was delicient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	LIGHT LIFETUIG GEGLUGE				
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	. MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	-		ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE CAMERON HEALTH CARE

Street Address:	City and State:					
PO BOX 216		CAMERON WV 26033				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	60	NON-PROFIT OTHER	01/15/88			

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
32	0	21				
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	esidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide ghly specialized care and services.				%	
Bathing						
Residents requiring some or total assista	ance in bathing.	27	84.4	83.2	78.3	
Dressing						
Residents requiring some or total assista	ance in dressing.	29	90.6	86.8	76.7	
Toileting						
Residents requiring some or total assista	ance in toileting.	25	78.1	77.5	63.4	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	26	81.3	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	20	62.5	71.8	59.1	
Residents on individually written bowel a	and bladder retraining program.	11	34.4	5.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	3	9.4	32.4	29.3	
	·					
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		17	53.1	49.4	39.1	
Residents requiring restraints.		9	28.1	43.7	31.7	
-						
Confused or disoriented residents.		14	43.8	62.5	55.8	
Residents with bed sores.		1	3.1	5.6	4.7	
	y gr					
Residents receiving special skin care.		11	34.4	29.2	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	D & DEDC	ENT OF EA	CILITIES
acility must meet. There are over 500 separate requirements. The information presented				& PERCENT OF FACILI MEETING REQUIREMENT	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	TION
endency may represent an ongoing problem of a one-time failure of a single stall person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF F				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	МЕТ	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	МЕТ	34	47.9	2452	44.8	

NURSING HOME PROFILE JEFFERSONIAN MANOR INC

Street Address:		City and State:	
RTE 9 BOX 220		CHARLES TOWN WV 2541	14
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICE	118	PROPRIETARY	06/12/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
117	0	49				
Caution: A large number of residents with these chara-	acteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate ca highly specialized care and services.	re. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assis	tance in bathing.	102	87.2	83.2	78.3	
Dressing						
Residents requiring some or total assis	tance in dressing.	98	83.8	86.8	76.7	
Toileting						
Residents requiring some or total assis	tance in toileting.	83	70.9	77.5	63.4	
Transferring						
Residents requiring some or total assis tub or toilet.	tance moving from bed to chair or to	99	84.6	80.9	66.0	
Continence						
Residents with catheters or partial or to	otal loss of bowel or bladder control.	89	76.1	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	16	13.7	5.6	6.1	
Eating						
Residents receiving tube feedings or re	equiring assistance with eating.	25	21.4	32.4	29.3	
<u> </u>			-			
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		71	60.7	49.4	39.1	
Residents requiring restraints.		53	45.3	43.7	31.7	
Confused or disoriented residents.		73	62.4	62.5	55.8	
Residents with bed sores.		5	4.3	5.6	4.7	
Residents receiving special skin care.		8	6.8	29.2	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT		
ficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	
					·	

NURSING HOME PROFILE CAPITAL CITY NURSING HOME

Street Address: City and State:			
1301 VIRGINIA ST, E		CHARLESTON WV 25301	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	87	NON-PROFIT OTHER	07/15/87

	RESIDENT CHARACTERIST				,
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
85	85 0			.0	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	75	88.2	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	70	82.4	86.8	76.7
Toileting	5				
Residents requiring some or total assist	ance in toileting.	67	78.8	77.5	63.4
Transferring					,
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	68	80.0	80.9	66.0
Continence		- 50	00.0	00.0	00.0
	tallage of become or bladder control	48	56.5	71.8	59.1
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	36.5	/1.0	39.1
Residents on individually written bowel	and bladder retraining program.	3	3.5	5.6	6.1
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	34	40.0	32.4	29.3
Completely bedfast residents.		2	2.4	1.8	3.6
Residents confined to chairs.		53	62.4	49.4	39.1
Residents requiring restraints.		28	32.9	43.7	31.7
Confused or disoriented residents.		38	44.7	62.5	55.8
Tellison of districtive residents.					
Residents with bed sores.		5	5.9	5.6	4.7
nesidents with Ded Sores.			3.0	3.0	7.7
Boots of the state		85	100	20.2	24.0
Residents receiving special skin care.		65	100	29.2	24.0

FACILITY MET/				
NOT	STATE		NAT	ION
MET	#	%	#	%
MET	1	1.4	65	1.2
MET	6	8.5	198	3.6
MET	1	1.4	79	1.4
NOT MET	26	36.6	564	10.3
MET	19	26.8	798	14.6
MET	2	2.8	25	0.5
MET	6	8.5	89	1.6
MET	0	0.0	0	0.0
MET	1	1.4	25	0.5
MET	0	0.0	0	0.0
NOT MET	5	7.0	335	6.1
NOT MET	22	31.0	1187	21.7
NOT MET	5	7.0	679	12.4
MET	6	8.5	382	7.0
MET	16	22.5	807	14.8
NOT MET	4	5.6	700	12.8
	MET/NOT MET MET MET MET MET MET MET MET	MET/ NOT ST # # NOT MET	MET/NOT MET NOT MEETING MET # MET 1 MET 6 MET 1 MET 1 NOT MET 26 MET 2 MET 2 MET 0 MET 0 MET 0 NOT MET 5 NOT MET 2 31.0 NOT MET 5 7.0 MET 6 8.5	MET/ NOT MET NOT MEETING REQUIREM MAT MET # MET 1 MET 6 MET 1 1 1.4 79 NOT MET 26 36.6 564 MET 2 2 2.8 25 MET 0 0.0 0 MET 1 1.4 25 MET 0 0.0 0 NOT MET 5 7.0 335 NOT MET 5 7.0 679 MET 6 8.5 382 MET 16 22.5 807

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the appropriate or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	,601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE ARTHUR B HODGES CENTER

Street Address:		City and State:	
500 MORRIS ST		CHARLESTON WV 25301	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	NON-PROFIT OTHER	03/18/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
113	0		7	8		
Caution: A large number of residents with these characteristics.	cteristics does not indicate whether those	FACILITY		STATE	NATION	
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide nighly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	99	87.6	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	103	91.2	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	92	81.4	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	102	90.3	87.3	77.2	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.		70	61.9	76.9	68.2	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	52	46.0	47.4	37.7	
Completely bedfast residents.		2	1.8	2.9	3.4	
Residents confined to chairs.		94	83.2	58.4	50.8	
Residents requiring restraints.		29	25.7	51.1	41.3	
Confused or disoriented residents.		52	46.0	63.4	58.4	
Residents with bed sores.		7	6.2	6.8	7.1	
Residents receiving special skin care.		16	14.2	33.4	31.2	

was delicent in the indicated area at the time of the safety.							
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented					NT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	NAT	ION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%		
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1		
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5		
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8		
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5		
Each resident is given privacy during treatment and care of personal needs.	мет	10	21.7	1618	17.1		
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4		
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2		
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3		
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		2	4.3	145	1.5		
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5		
Nursing services are provided at all times to meet the needs of residents.	мет	4	8.7	508	5.4		
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	мет	14	30.4	2816	29.8		
Each resident receives care necessary to prevent skin breakdown.	мет	4	8.7	1733	18.3		
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.		
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0		
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		NATION # 9/	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE HEARTLAND OF CHARLESTON

Street Address:		City and State:	
3819 CHESTERFIELD AVE SE		CHARLESTON WV 25304	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	195	PROPRIETARY	03/13/87

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
167	0 149		149		
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate car-		FAC	ILITY	STATE	NATION
highly specialized care and services.	highly specialized care and services.		%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	129	77.2	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	146	87.4	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	130	77.8	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	128	76.6	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	122	73.1	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	8	4.8	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	53	31.7	32.4	29.3
Completely bedfast residents.		1	0.6	1.8	3.6
Residents confined to chairs.		102	61.1	49.4	39.1
Residents requiring restraints.		72	43.1	43.7	31.7
Confused or disoriented residents.		128	76.6	62.5	55.8
Residents with bed sores.		3	1.8	5.6	4.7
Residents receiving special skin care.		66	39.5	29.2	24.0
and the state of t		L	L	.1	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.			NUMBER & PERCENT OF NOT MEETING REQUI		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE MEADOWBROOK ACRES

Street Address:		City and State:	
RT 6 BOX 544C		CHARLESTON WV 25311	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	03/04/88

Total Residents on Day of Survey:	Medicare Residents: Medicaid Residents:						
58	0	37					
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	52	89.7	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	46	79.3	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	52	89.7	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	58	100	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	44	75.9	71.8	59.1		
Residents on individually written bowel	and bladder retraining program.	6	10.3	5.6	6.1		
Eating							
Residents receiving tube feedings or re-	quiring assistance with eating.	19	32.8	32.4	29.3		
Completely bedfast residents.		2	3.4	1.8	3.6		
Residents confined to chairs.		17	29.3	49.4	39.1		
Residents requiring restraints.		27	46.6	43.7	31.7		
Confused or disoriented residents.		20	34.5	62.5	55.8		
Residents with bed sores.		1	1.7	5.6	4.7		
Residents receiving special skin care.		2	3.4	29.2	24.0		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILI NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/	ST	ATE	NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	1 %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	МЕТ	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A NOT deficiency may represent an ongoing problem or a one-time failure of a single staff person. Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/fleostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary. MET 8 11. Drugs are administered according to the written orders of the attending physician. Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians orders, and to the extent medically possible, based on the recommended detary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. MET 17 23. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 13 18. All common resident areas are clean, sanitary, and free of odors. MET 0 0. Resident care equipment is clean and maintained in safe operating condi	NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
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Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. MET 11 15. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 13 18. Toilet and bath facilities are clean, sanitary, and free of odors. All common resident areas are clean, sanitary and free of odors. MET 13 18. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 0 0. Resident care equipment is clean and maintained in safe operating condition.	601	11.0		
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according to the instructions of the attending physician. MET 13 18. Toilet and bath facilities are clean, sanitary, and free of odors. NOT MET 15 21. All common resident areas are clean, sanitary and free of odors. MET 13 18. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 0 0. Resident care equipment is clean and maintained in safe operating condition. MET 0 0.	481	8.8		
All common resident areas are clean, sanitary and free of odors. MET 13 18. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 0 0. Resident care equipment is clean and maintained in safe operating condition. MET 0 0.	479	8.8		
All essential mechanical and electrical equipment is maintained in safe operating condition. MET 13 18. MET 0 0. Resident care equipment is clean and maintained in safe operating condition. MET 0 0.	1064	19.4		
Resident care equipment is clean and maintained in safe operating condition. MET 0 0. MET 0 0.	1169	21.4		
MET 0 0.	0	0.0		
Isolation techniques to prevent the spread of infection are followed by all personnel	0	0.0		
MET 0 0.	0	0.0		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 5 7.	267	4.9		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions. MET 34 47.	2452	44.8		

NURSING HOME PROFILE FOX NSR HOME

Street Address:

RD I BOX 2 PYRAMUS ST

CHESTER WV 26034

Participation:

of Beds: Type of Ownership: Survey Date:

MEDICAID ICF

60 PROPRIETARY

08/21/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
57	57 0		48			
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	36	63.2	83.2	78.3	
Dressing						
Residents requiring some or total assista	ance in dressing.	54	94.7	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	52	91.2	77.5	63.4	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	32	56.1	80.9	66.0	
Continence						
Residents with catheters or partial or to	tai loss of bowel or bladder control.	51	89.5	71.8	59.1	
Residents on individually written bowel a	and bladder retraining program.	2	3.5	5.6	6.1	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	6	10.5	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		14	24.6	49.4	39.1	
Residents requiring restraints.		22	38.6	43.7	31.7	
Confused or disoriented residents.		46	80.7	62.5	55.8	
Residents with bed sores.		6	10.5	5.6	4.7	
Residents receiving special skin care.		10	17.5	29.2	24.0	

was deficient in the indicated area at the time of the survey.							
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				OF FACILITIES JIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%		
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2		
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6		
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4		
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3		
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6		
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5		
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6		
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0		
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5		
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0		
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1		
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7		
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4		
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0		
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8		
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS					
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT		ATE	NATION			
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	. 601	11.0		
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	11	15.5	269	4.9		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	мет	18	25.4	311	5.7		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8		
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4		
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4		
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0		
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0		
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8		

NURSING HOME PROFILE CLARKSBURG CONT CARE CNTR

Street Address:		City and State:					
RT 5 BOX 360		CLARKSBURG WV 26301					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	90	PROPRIETARY	02/11/88				

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:						
Total hesidelits oil Day of Survey.	Medicale Residents.	wedicald nesidelits.				
87	0			59		
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care			ILITY	STATE	NATION	
highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	47	54.0	83.2	78.3	
Dressing		:				
Residents requiring some or total assista	ance in dressing.	64	73.6	86.8	76.7	
Toileting						
Residents requiring some or total assista	ance in toileting.	65	74.7	77.5	63.4	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	63	72.4	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	52	59.8	71.8	59.1	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	18	20.7	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		22	25.3	49.4	39.1	
Residents requiring restraints.		29	33.3	43.7	31.7	
Confused or disoriented residents.		42	48.3	62.5	55.8	
Residents with bed sores.		5	5.7	5.6	4.7	
Residents receiving special skin care.		6	6.9	29.2	24.0	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	пот	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	мет	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with ndividuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REQUIREMEN			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8
Reminder: The results of the full survey are available				•	

NURSING HOME PROFILE HEARTLAND OF CLARKSBURG

Street Address:		City and State:	
100 PARKWAY DR BOX 468		CLARKSBURG WV 26301	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	PROPRIETARY	12/30/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
112	0	79					
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	95	84.8	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	97	86.6	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	74	66.1	77.5	63.4		
Transferring							
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	64	57.1	80.9	66.0		
Continence							
		75	67.0	71.8	59.1		
Residents with catheters or partial or to	tal loss of bowel of bladder control.	/5	07.0	71.0	33.1		
Residents on individually written bowel a	and bladder retraining program.	7	6.3	5.6	6.1		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	39	34.8	32.4	29.3		
Completely bedfast residents.		0	0.0	1.8	3.6		
Residents confined to chairs.		35	31.3	49.4	39.1		
Residents requiring restraints.		43	38.4	43.7	31.7		
-							
Confused or disoriented residents.		83	74.1	62.5	55.8		
Residents with bed sores.		5	4.5	5.6	4.7		
Pooldonto vessiving or sist still oggi-		3	2.7	29.2	24.0		
Residents receiving special skin care.			2.1	20.2	24.0		

was deficient in the indicated area at the time of the survey.				*****		
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	МЕТ	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	
				1		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILI NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ΓΙΟΝ
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	8	11.3	601	11.0
Orugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging n normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.			47.9	2452	44.8

NURSING HOME PROFILE WEBSTER CONTINUOUS CARE CTR

Street Address:	reet Address: City and State:		
P O BOX 0820 COWEN WV 26206			
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	01/14/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
60	0	49					
Caution: A large number of residents with these chara				NATION			
residents are receiving appropriate or inappropriate car highly specialized care and services.		#	%	%	%		
Bathing							
Residents requiring some or total assist	tance in bathing.	55	91.7	83.2	78.3		
Dressing	3						
Residents requiring some or total assistance in dressing.		56	93.3	86.8	76.7		
Toileting	lance in dressing.	30	30.0	00.0	70.7		
Residents requiring some or total assist	tanco in toilotina	51	85.0	77.5	63.4		
	tance in tolleting.	31	05.0	77.5	00.4		
Transferring Residents requiring some or total assistance moving from bed to chair or to tub or toilet.		54	90.0	80.9	66.0		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.		50	83.3	71.8	59.1		
Residents on individually written bowel	and bladder retraining program.	4	6.7	5.6	6.1		
Eating							
Residents receiving tube feedings or re	quiring assistance with eating.	35	58.3	32.4	29.3		
Completely bedfast residents.		0	0.0	1.8	3.6		
Residents confined to chairs.		25	41.7	49.4	39.1		
Residents requiring restraints.		35	58.3	43.7	31.7		
Confused or disoriented residents.		43	71.7	62.5	55.8		
Residents with bed sores.		6	10.0	5.6	4.7		
Residents receiving special skin care.		39	65.0	29.2	24.0		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	МЕТ	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	мет	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	мет	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	мет	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE CARE HAVEN OF RALEIGH

Street Address:

4-H LAKE RD + RT 3 DRAWER HH

DANIELS WV 25832

Participation: # of Beds: Type of Ownership: Survey Date:

MEDICAID ICF 60 PROPRIETARY 08/21/87

SELECTEL	RESIDENT CHARACTERIST	ics			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
58	0	47			
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate can		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	56	96.6	83.2	78.3
Dressing					
Residents requiring some or total assistance in dressing.		49	84.5	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	46	79.3	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	46	79.3	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		38	65.5	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	15	25.9	32.4	29.3
					-
Completely bedfast residents.		1	1.7	1.8	3.6
Residents confined to chairs.		24	41.4	49.4	39.1
Residents requiring restraints.		16	27.6	43.7	31.7
-					
Confused or disoriented residents.		27	46.6	62.5	55.8
Residents with bed sores.		3	5.2	5.6	4.7
Residents receiving special skin care.		6	10.3	29.2	24.0
		1			

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	
					1	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE		LION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE AMERICARE BOONE NSG & REHAB CTR

Street Address:	City and State:		
RT 1 LICK CREEK RD	CRD DANVILLE WV 25053		
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	09/25/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
110	3	94			
Caution: A large number of residents with these characteristics.	cteristics does not indicate whether those	FACILITY STATE NA		NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	92	83.6	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	100	90.9	90.0	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	96	87.3	85.1	73.8
Transferring					
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.		91	82.7	87.3	77.2
Continence		,			
Residents with catheters or partial or total loss of bowel or bladder control.		97	88.2	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	3	2.7	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	93	84.5	47.4	37.7
Completely bedfast residents.		5	4.5	2.9	3.4
Residents confined to chairs.		59	53.6	58.4	50.8
					44.0
Residents requiring restraints.		56	50.9	51.1	41.3
Confirmed on discuired and anti-		92	83.6	63.4	58.4
Confused or disoriented residents.		32	00.0	00.4	30.4
Desidents with had a		3	2.7	6.8	7.1
Residents with bed sores.		3	2.1	0.6	7.1
Decidents receiving an exist at the		56	50.9	33.4	31.2
Residents receiving special skin care.		30	50.9	55.4	01.2

was deficient in the indicated area at the time of the survey.							
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT ON NOT MEETING REQU					
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A leficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	NOT STAT		TAN	ION		
	MET	#	%	#	%		
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1		
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5		
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8		
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5		
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1		
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4		
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2		
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3		
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	2	4.3	145	1.5		
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5		
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4		
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	МЕТ	14	30.4	2816	29.8		
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3		
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1		
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0		
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	8.7	1665	17.6		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT MET	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.		12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE AMERICARE DUNBAR NSG & REHAB CTR

Street Address:		City and State:	
501 CALDWELL LANE		DUNBAR WV 25064	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	01/07/88

Total Residents on Day of Survey:	aid Resi	dents:			
112	11	54			
Caution: A large number of residents with these characteristics.	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assists	ance in bathing.	89	79.5	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	109	97.3	90.0	83.2
Toileting					
Residents requiring some or total assists	ance in toileting.	108	96.4	85.1	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	108	96.4	87.3	77.2
Continence					:
Residents with catheters or partial or to	tal loss of bowel or bladder control.	97	86.6	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	77	68.8	47.4	37.7
Completely bedfast residents.		4	3.6	2.9	3.4
Residents confined to chairs.		65	58.0	58.4	50.8
Residents requiring restraints.		70	62.5	51.1	41.3
-					
Confused or disoriented residents.		97	86.6	63.4	58.4
Residents with bed sores.		7	6.3	6.8	7.1
Residents receiving special skin care.		32	28.6	33.4	31.2

was deficient in the indicated area at the time of the survey.	,					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented					OF FACILITIES JIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.		10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	
evaluation.	MET	4	8.7	1665	17	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		 	ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	12.0	# # # # # # # # # # # # # # # # # # # #	11.0
and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	МЕТ	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE ELKINS CONVLSCNT HOSP D/P SNF

Street Address:		City and State:	
FOURTH ST		ELKINS WV 26241	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	105	NON-PROFIT OTHER	03/24/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
90	2	86					
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate cal highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	55	61.1	84.9	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	74	82.2	90.0	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	61	67.8	85.1	73.8		
Transferring							
Residents requiring some or total assistub or toilet.	tance moving from bed to chair or to	65	72.2	87.3	77.2		
Continence							
Residents with catheters or partial or to	otal loss of bowel or bladder control.	74	82.2	76.9	68.2		
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6		
Eating							
Residents receiving tube feedings or re	quiring assistance with eating.	75	83.3	47.4	37.7		
Completely bedfast residents.		1	1.1	2.9	3.4		
Residents confined to chairs.		44	48.9	58.4	50.8		
Residents requiring restraints.		46	51.1	51.1	41.3		
Confused or disoriented residents.		61	67.8	63.4	58.4		
Residents with bed sores.		5	5.6	6.8	7.1		
Residents receiving special skin care.		10	11.1	33.4	31.2		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
eliciency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	мет	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	ER & PERC	ENT OF FA	CILITIES	
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NOT MEETING REQUIREMENTS				
			TATE	-	ION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	# 6	13.0	1123	11.9	
and tube reeding.	IVIET	- 0	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8	

NURSING HOME PROFILE NELLAS INC

Street Address:		City and State:	
PO BOX 1639		ELKINS WV 26241	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	102	PROPRIETARY	11/06/87

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
98	0	66						
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATIO			
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	98	100	84.9	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	91	92.9	90.0	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	73	74.5	85.1	73.8			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	77	78.6	87.3	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	66	67.3	76.9	68.2			
Residents on individually written bowel	and bladder retraining program.	4	4.1	5.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	29	29.6	47.4	37.7			
Completely bedfast residents.		3	3.1	2.9	3.4			
Residents confined to chairs.		52	53.1	58.4	50.8			
Residents requiring restraints.		51	52.0	51.1	41.3			
-	,	,						
Confused or disoriented residents.		94	95.9	63.4	58.4			
Residents with bed sores.		6	6.1	6.8	7.1			
Residents receiving special skin care.		1	1.0	33.4	31.2			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET/ NOT	STATE		NATION	
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

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Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented selow does not reflect the severity or the duration of the problems leading to a deficiency. A seficiency may represent an ongoing problem or a one-time failure of a single staff person.					T OF FACILITIES OUIREMENTS	
		STATE			TON	
		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	
		L	1			

NURSING HOME PROFILE NELLAS NURSING HOME

	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Onto Home	
Street Address:		City and State:	
301 CENTRAL ST		ELKINS WV 26241	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	84	PROPRIETARY	10/22/87

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
83	0	55			
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	75	90.4	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	75	90.4	86.8	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	62	74.7	77.5	63.4
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	63	75.9	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	55	66.3	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	1	1.2	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	20	24.1	32.4	29.3
Completely bedfast residents.		1	1.2	1.8	3.6
Residents confined to chairs.		53	63.9	49.4	39.1
Residents requiring restraints.		73	88.0	43.7	31.7
Confused or disoriented residents.		48	57.8	62.5	55.8
Residents with bed sores.		2	2.4	5.6	4.7
Residents receiving special skin care.		8	9.6	29.2	24.0

was deficient in the indicated area at the time of the survey.	.,					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	R & PERCE	ENT OF FA	CILITIES
facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITI NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
deliciency may represent an ongoing problem of a one-time failure of a single stan person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8
Powindow The results of the full current are evaluate				•	

04/30/87

NURSING HOME PROFILE SHEPPARD HEALTH CARE INC

City and State: Street Address: ELLENBORO WV 26346 Type of Ownership: Participation: Survey Date: # of Beds:

PROPRIETARY

24

MEDICAID ICF

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
24	0	22			
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION
esidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide nighly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	24	100	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	23	95.8	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	23	95.8	77.5	63.4
Transferring	and was time from had to obsir or to				
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	21	87.5	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	17	70.8	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	10	41.7	32.4	29.3
Completely bedfast residents.		3	12.5	1.8	3.6
Residents confined to chairs.		10	41.7	49.4	39.1
Residents requiring restraints.		8	33.3	43.7	31.7
Confused or disoriented residents.		18	75.0	62.5	55.8
Residents with bed sores.		1	4.2	5.6	4.7
Residents receiving special skin care.		15	62.5	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and					
responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents'					
personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Fach resident is allowed to communicate acceptate and most privately with					. 1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing					
as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
					_

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented blow does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	.601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.		34	47.9	2452	44.8

NURSING HOME PROFILE

	ANDUNG AT	FAIRIUUNI	
Street Address:		City and State:	
130 KAUFMAN DR		FAIRMONT WV 26554	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	PROPRIETARY	07/02/87

SELECTE	RESIDENT CHARACTERIST	ICS					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
110	0	•		72		'2	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ACILITY STATE		NATION		
highly specialized care and services.			%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	86	78.2	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	82	74.5	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	73	66.4	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	70	63.6	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	58	52.7	71.8	59.1		
Residents on individually written bowel	and bladder retraining program.	6	5.5	5.6	6.1		
Eating	31.						
Residents receiving tube feedings or re	quiring assistance with eating	27	24.5	32.4	29.3		
Trestactive receiving table recainings of the	quining assistance with cating.						
Completely bedfast residents.		0	0.0	1.8	3.6		
Residents confined to chairs.		27	24.5	49.4	39.1		
Residents requiring restraints.		53	48.2	43.7	31.7		
Confused or disoriented residents.		64	58.2	62.5	55.8		
Residents with bed sores.		11	10.0	5.6	4.7		
Residents receiving special skin care.		27	24.5	29.2	24.0		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	FACILITY MET/	NUMBER & PERCENT OF FA			
	NOT	ST	TATE NA		ATION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	NOT MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE			ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE FAINMONT GENERAL HOSPITAL DP/SNF/ICF

Street Address:		City and State:	
1325 LOCUST AVENUE		FAIRMONT WV 26554	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	35	NON-PROFIT OTHER	10/20/87

SELECTEL	RESIDENT CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
6	0					
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FACILITY STATE			NATION	
highly specialized care and services.		#	# % %			
Bathing						
Residents requiring some or total assist	ance in bathing.	5	83.3	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	6	100	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	6	100	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	5	83.3	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	3	50.0	76.9	68.2	
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	2	33.3	47.4	37.7	
Completely bedfast residents.		1	16.7	2.9	3.4	
Residents confined to chairs.		1	16.7	58.4	50.8	
Residents requiring restraints.		0	0.0	51.1	41.3	
_						
Confused or disoriented residents.		2	33.3	63.4	58.4	
Residents with bed sores.		0	0.0	6.8	7.1	
Residents receiving special skin care.		4	66.7	33.4	31.2	
			L	L		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		E NATI	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
					4

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCE NOT MEETING OT STATE			
		STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through ubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical unctioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the acility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging n normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE MARION HEALTH CARE HOSP

401 GUFFEY ST FAIRMONT WV 26554			
Street Address:			
401 GUFFEY ST		FAIRMONT WV 26554	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	44	STATE GOVERNMENT	12/01/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
39	1					
Caution: A large number of residents with these chara		FACILITY		STATE	NATION	
residents are receiving appropriate or inappropriate can highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	tance in bathing.	36	92.3	84.9	81.5	
Dressing						
Residents requiring some or total assist	tance in dressing.	38	97.4	90.0	83.2	
Toileting						
Residents requiring some or total assist	tance in toileting.	37	94.9	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	tance moving from bed to chair or to	37	94.9	87.3	77.2	
Continence						
Residents with catheters or partial or to	otal loss of bowel or bladder control.	37	94.9	76.9	68.2	
•						
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or re	quiring assistance with eating.	24	61.5	47.4	37.7	
Completely bedfast residents.		3	7.7	2.9	3.4	
Residents confined to chairs.		33	84.6	58.4	50.8	
Residents requiring restraints.		18	46.2	51.1	41.3	
Confused or disoriented residents.		34	87.2	63.4	58.4	
Residents with bed sores.		2	5.1	6.8	7.1	
Residents receiving special skin care.		33	84.6	33.4	31.2	

was deficient in the indicated area at the time of the survey.	1 1					
facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	OT STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	МЕТ	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	МЕТ	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	МЕТ	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
			ATE		ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	%	# .	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE WISHING WELL HLTH CNTR

Street Address:

City and State:

FAIRMONT WV 26554

Participation:

of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

120

PROPRIETARY

01/17/88

SELECTEL	RESIDEN! CHARACTERIST	103				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
120	8	72				
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate care			FACILITY STATE		NATION	
highly specialized care and services.	e. It may renect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	108	90.0	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	109	90.8	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	108	90.0	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	108	90.0	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of howel or bladder control	89	74.2	76.9	68.2	
Trooley North California of Partial Co. 10	a. 1000 01 DOWO! O. D.aaaci. Conko.					
Residents on individually written bowel	and bladder retraining program	2	1.7	5.2	4.6	
Eating	and bladder retraining program.	_	1	0.2	10	
Residents receiving tube feedings or receiving	guiring assistance with eating	50	41.7	47.4	37.7	
Residents receiving tube reedings of rec	quilling assistance with eating.	30	71.7	77.7	07.7	
Completely hadfact varidants		0	0.0	2.9	3.4	
Completely bedfast residents.		0	0.0	2.9	3.4	
		F.4	40.5	50.4	50.0	
Residents confined to chairs.		51	42.5	58.4	50.8	
Residents requiring restraints.		96	80.0	51.1	41.3	
•						
Confused or disoriented residents.		59	49.2	63.4	58.4	
Residents with bed sores.		21	17.5	6.8	7.1	
Residents receiving special skin care.		44	36.7	33.4	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT ON NOT MEETING REQU			
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.9
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	мет	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	мет	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	мет	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
	1		1	1	

facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		CILITY NUMBER & PERCENT OF NOT MEETING REQUIRE			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8
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NURSING HOME PROFILE

WISHING WELL WANDA INC						
Street Address:		City and State:				
1543 COUNTRY CLUB RD		FAIRMONT WV 26554				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICE	60	PROPRIETARY	05/08/87			

SELECTED RESIDENT CHARACTERISTICS													
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:									
21	0	12		12		12		12		12		12	
Caution: A large number of residents with these char residents are receiving appropriate or inappropriate ca	acteristics does not indicate whether those	FAC	ILITY	STATE	NATION								
highly specialized care and services.		#	%	%	%								
Bathing													
Residents requiring some or total assis	tance in bathing.	19	90.5	83.2	78.3								
Dressing													
Residents requiring some or total assis	stance in dressing.	21	100	86.8	76.7								
Toileting													
Residents requiring some or total assis	tance in toileting.	20	95.2	77.5	63.4								
Transferring													
Residents requiring some or total assistub or toilet.	stance moving from bed to chair or to	18	85.7	80.9	66.0								
Continence													
Residents with catheters or partial or to	17	81.0	71.8	59.1									
Residents on individually written bowel	and bladder retraining program.	1	4.8	5.6	6.1								
Eating													
Residents receiving tube feedings or re	equiring assistance with eating.	20	95.2	32.4	29.3								
3													
Completely bedfast residents.		1	4.8	1.8	3.6								
Residents confined to chairs.		11	52.4	49.4	39.1								
instruction to online.													
Residents requiring restraints.		16	76.2	43.7	31.7								
residente roquiring rectalities.													
Confused or disoriented residents.		19	90.5	62.5	55.8								
Telling of all of the first telling.				-									
Residents with bed sores.		3	14.3	5.6	4.7								
TOORGOING WINT DOG SUICS.				3.0									
Posidonte receiving anguist skip asse		4	19.0	29.2	24.0								
Residents receiving special skin care.			13.0	20.2	27.0								

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
deficiency may represent air originity problem of a one-time failure of a single stail person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	МЕТ	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	МЕТ	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	МЕТ	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	МЕТ	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	МЕТ	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	МЕТ	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8
				-1	

NURSING HOME PROFILE FAYETTE CONT CARE CNTR

Street Address:		City and State:	
100 HRESAN BLVD		FAYETTEVILLE WV 25840	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	08/14/87

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
59	0	52			
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	54	91.5	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	57	96.6	86.8	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	50	84.7	77.5	63.4
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	45	76.3	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	31	52.5	71.8	59.1
Residents on individually written bowel a	and bladder retraining program	1	1.7	5.6	6.1
Eating	and bladder retraining program.				
Residents receiving tube feedings or rec	quiring assistance with eating	14	23.7	32.4	29.3
Tresidente receiving table recainings of rec	quining assistance with eating.			32	
Completely bedfast residents.		1	1.7	1.8	3.6
Residents confined to chairs.		26	44.1	49.4	39.1
Residents requiring restraints.		18	30.5	43.7	31.7
-					
Confused or disoriented residents.		14	23.7	62.5	55.8
Residents with bed sores.		11	18.6	5.6	4.7
30.00					
Residents receiving special skin care.		59	100	29.2	24.0
nestrents receiving special skill care.					1.

FACILITY MET/				
NOT	ST	ATF	NAT	ION
MET	#	%	#	%
MET	1	1.4	65	1.2
MET	6	8.5	198	3.6
MET	1	1.4	79	1.4
MET	26	36.6	564	10.3
MET	19	26.8	798	14.6
MET	2	2.8	25	0.5
MET	6	8.5	89	1.6
MET	0	0.0	0	0.0
MET	1	1.4	25	0.5
MET	0	0.0	0	0.0
MET	5	7.0	335	6.1
MET	22	31.0	1187	21.7
NOT MET	5	7.0	679	12.4
NOT MET	6	8.5	382	7.0
NOT MET	16	22.5	807	14.8
MET	4	5.6	700	12.8
	MET/NOT MET MET MET MET MET MET MET MET	MET/ NOT ST MET	MET/ NOT MEETING STATE # % MET	MET/ NOT MET NOT MEETING REQUIREM MAT MET # MET 1 MET 6 MET 1 1 1.4 79 MET 26 36.6 564 MET 19 26.8 798 MET 2 2.8 25 MET 0 0.0 0 MET 1 1.4 25 MET 0 0.0 0 MET 0 0.0 0 MET 5 7.0 335 MET 22 31.0 1187 NOT MET 5 7.0 679 NOT MET 6 8.5 382 NOT MET 16 22.5 807

eminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented			BER & PERCENT OF FACILITIES OT MEETING REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	ПОТ		ATE		ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	%	#	%
and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.		34	47.9	2452	44.8

NURSING HOME PROFILE BRIGHTWOOD NSG HM

	Dhidiii WO	JD NOG FIM	
Street Address:		City and State:	
840 LEE RD		FOLLANSBEE WV 26037	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	10/16/87

	RESIDENT CHARACTERIST	,				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
56	0	46				
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FACILITY STATE NA		NATION		
highly specialized care and services.	e. It may renect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	43	76.8	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	46	82.1	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	48	85.7	77.5	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	38	67.9	80.9	66.0		
Continence						
Residents with catheters or partial or to	33	58.9	71.8	59.1		
Residents on individually written bowel	and bladder retraining program.	4	7.1	5.6	6.1	
Eating						
Residents receiving tube feedings or re	quiring assistance with eating.	10	17.9	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
· · · · · · · · · · · · · · · · · · ·						
Residents confined to chairs.		21	37.5	49.4	39.1	
Residents requiring restraints.		27	48.2	43.7	31.7	
3						
Confused or disoriented residents.		43	76.8	62.5	55.8	
Residents with bed sores.		5	8.9	5.6	4.7	
Residents receiving special skin care.		20	35.7	29.2	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	TE NATIO		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	.12.8	

FACILITY MET/			REQUIREMENTS	
NOT	STATE		NAT	ION
MET	#	%	#	%
MET	1	1.4	255	4.7
MET	8	11.3	748	13.7
MET	8	11.3	601	11.0
MET	28	39.4	1385	25.3
NOT MET	17	23.9	1045	19.1
MET	11	15.5	269	4.9
MET	18	25.4	311	5.7
MET	15	21.1	481	8.8
MET	13	18.3	479	8.8
MET	15	21.1	1064	19.4
MET	13	18.3	1169	21.4
MET	0	0.0	0	0.0
MET	0	0.0	0	0.0
MET	0	0.0	0	0.0
MET	5	7.0	267	4.9
MET	34	47.9	2452	44.8
	MET/NOT MET MET MET MET MET MET MET MET	MET	MET/ NOT MEETING	MET/ NOT MET NOT MEETING REQUIREM # MET # MET 1 1.4 255 MET 8 MET 8 11.3 601 MET 28 39.4 1385 NOT MET 17 23.9 1045 MET 18 25.4 311 MET 15 21.1 481 MET 13 18.3 479 MET 13 18.3 1169 MET 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

NURSING HOME PROFILE DAWN VIEW MANOR

Street Address:		City and State:			
FORT ASHBY		FORT ASHBY WV 26719			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICAID ICF	60	PROPRIETARY	11/16/87		

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:						
59	0	46				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate can highly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assis	tance in hathing	59	100	83.2	78.3	
Dressing	action in Sacting.		100	00.2	70.0	
-	tongo in dragging	50	04.0	00.0	70.7	
Residents requiring some or total assist	tance in dressing.	56	94.9	86.8	76.7	
Toileting						
Residents requiring some or total assis	tance in toileting.	47	79.7	77.5	63.4	
Transferring Residents requiring some or total assis	tance moving from hed to chair or to					
tub or toilet.		59	100	80.9	66.0	
Continence						
Residents with catheters or partial or to	otal loss of bowel or bladder control.	56	94.9	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	1	1.7	5.6	6.1	
Eating	3 (1.23					
Residents receiving tube feedings or re	quiring assistance with eating	22	37.3	32.4	29.3	
Trooler to conving table recallings of re-	quiling accordance with catting.					
Completely bedfast residents.		4	6.8	1.8	3.6	
odifficiety bedrast residents.	-		0.0	1.0	0.0	
Paridonta confluent to obstan		47	79.7	49.4	39.1	
Residents confined to chairs.		47	79.7	49.4	39.1	
Residents requiring restraints.		29	49.2	43.7	31.7	
•						
Confused or disoriented residents.		59	100	62.5	55.8	
Residents with bed sores.		6	10.2	5.6	4.7	
Residents receiving special skin care.	•	16	27.1	29.2	24.0	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented solve does not reflect the severity or the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		TY NUMBER & PERCENT OF NOT MEETING REOUI				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION	
geniciency may represent an ongoing problem of a one-time failure of a single stan person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	

NURSING HOME PROFILE PENDLETON NURSING HOME

	THE HOLD		
Street Address:		City and State:	
PO BOX 700		FRANKLIN WV 26807	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	91	NON-PROFIT OTHER	06/26/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
91	0	62				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate can highly specialized care and services.	re. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	tance in bathing.	55	60.4	83.2	78.3	
Dressing						
Residents requiring some or total assist	tance in dressing.	76	83.5	86.8	76.7	
Toileting						
Residents requiring some or total assist	tance in toileting.	75	82.4	77.5	63.4	
Transferring						
Residents requiring some or total assistub or toilet.	tance moving from bed to chair or to	76	83.5	80.9	66.0	
Continence						
Residents with catheters or partial or to	otal loss of bowel or bladder control.	66	72.5	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	8	8.8	5.6	6.1	
Eating						
Residents receiving tube feedings or re	quiring assistance with eating.	21	23.1	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		27	29.7	49.4	39.1	
Residents requiring restraints.		38	41.8	43.7	31.7	
Confused or disoriented residents.		45	49.5	62.5	55.8	
Residents with bed sores.		2	2.2	5.6	4.7	
Residents receiving special skin care.		4	4.4	29.2	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

OCEEO LES LEMANTOS MUNICIPAL						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT		
	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	МЕТ	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	МЕТ	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	МЕТ	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE MCDOWELL CONTINUOUS CARE CENTER

Street Address:		City and State:	
PO BOX 220		GARY WV 24836	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	PROPRIETARY	07/16/87

SELECTEL	RESIDENT CHARACTERIST	105				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
84	84 0		72			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	45	53.6	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	57	67.9	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting	55	65.5	77.5	63.4	
Transferring	and in teneting.		00.0	1		
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	45	53.6	80.9	66.0	
Continence					·	
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	47.6	71.8	59.1	
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	21	25.0	32.4	29.3	
Completely bedfast residents.		6	7.1	1.8	3.6	
Residents confined to chairs.		39	46.4	49.4	39.1	
Residents requiring restraints.		7	8.3	43.7	31.7	
•						
Confused or disoriented residents.		43	51.2	62.5	55.8	
Residents with bed sores.		2	2.4	5.6	4.7	
Residents receiving special skin care.		6	7.1	29.2	24.0	
Total Total Till Special Skill Cale.						

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NATION	
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
			· · · · · · · · · · · · · · · · · · ·		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		TAN	ION
leficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
ervices are provided to meet the residents' social and emotional needs by the acility or by referral to an appropriate social agency.		18	25.4	311	5.7
on ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging n normal pursuits, including religious activities of the resident's choice, if any.		15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE BEVERLY HEALTH CARE CNTR

Street Address:		City and State:						
MELROSE DRIVE		GLASGOW WV 25086						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICAID ICF	120	PROPRIETARY	10/22/87					

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
91	0	81						
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	86	94.5	83.2	78.3			
Dressing								
Residents requiring some or total assista	ance in dressing.	90	98.9	86.8	76.7			
Toileting								
Residents requiring some or total assista	ance in toileting.	76	83.5	77.5	63.4			
Transferring								
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	55	60.4	80.9	66.0			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	47	51.6	71.8	59.1			
Residents on individually written bowel a	and bladder retraining program.	4	4.4	5.6	6.1			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	20	22.0	32.4	29.3			
Completely bedfast residents.		1	1.1	1.8	3.6			
Residents confined to chairs.		70	76.9	49.4	39.1			
Residents requiring restraints.		38	41.8	43.7	31.7			
Confused or disoriented residents.		58	63.7	62.5	55.8			
Residents with bed sores.		7	7.7	5.6	4.7			
Residents receiving special skin care.		17	18.7	29.2	24.0			

was deficient in the indicated area at the time of the survey.	1					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		CILITIES ENTS			
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NOT ST		NAT	IATION	
		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	МЕТ	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	мет	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	# 1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	мет	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	МЕТ	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	мет	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE AMERICARE GLENVILLE NSG & REHAB CTR

Street Address:		City and State:						
46 FAIRGROUND RD		GLENVILLE WV 26351						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICAID ICF	65	PROPRIETARY	04/09/87					

Total Residents on Day of Survey:	Medicare Residents:		aid Resi	dents:	
		Medicaid Residents:			
Caution: A large number of residents with these chara	0	F40		5	1
residents are receiving appropriate or inappropriate care		#	ILITY %	STATE %	NATION %
highly specialized care and services. Bathing		π	/*	/6	/6
Residents requiring some or total assist	ance in bathing.	62	96.9	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	63	98.4	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	57	89.1	77.5	63.4
Transferring					-
Residents requiring some or total assist	ance moving from bed to chair or to	56	87.5	80.9	66.0
tub or toilet. Continence		30	67.5	80.9	00.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	53	82.8	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	1	1.6	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	21	32.8	32.4	29.3
	1 5				
Completely bedfast residents.		0	0.0	1.8	3.6
Completely bedrast residents.			0.0	1.0	0.0
Residents confined to chairs.		32	50.0	49.4	39.1
Residents requiring restraints.		40	62.5	43.7	31.7
•					
Confused or disoriented residents.		46	71.9	62.5	55.8
Residents with bed sores.		2	3.1	5.6	4.7
TOSIGOTICS WILLI DEG SUIES.		_		3.0	
			7.0	00.0	04.0
Residents receiving special skin care.		5	7.8	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REQUIREMEN			
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
		L			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	TION	
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	

NURSING HOME PROFILE GRAFTON CITY HOSP W B MURPHY NSG CARE

Street Address:		City and State:	
U S ROUTE 50 MARKET ST		GRAFTON WV 26354	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	68	LOCAL GOVERNMENT	02/19/88

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
62	19	43						
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATIO			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	58	93.5	84.9	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	61	98.4	90.0	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	53	85.5	85.1	73.8			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	62	100	87.3	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	44	71.0	76.9	68.2			
Residents on individually written bowel a	and bladder retraining program.	5	8.1	5.2	4.6			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	37	59.7	47.4	37.7			
Completely bedfast residents.		0	0.0	2.9	3.4			
Residents confined to chairs.		41 ,	66.1	58.4	50.8			
Residents requiring restraints.		41	66.1	51.1	41.3			
Confused or disoriented residents.		29	46.8	63.4	58.4			
Residents with bed sores.		3	4.8	6.8	7.1			
Residents receiving special skin care.		28	45.2	33.4	31.2			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT MET	STATE		NATION	
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	1 %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	мет	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCE NOT MEETING F			
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE ROSEWOOD HLTH CARE CTR

1100211000 112111 071112 0111						
Street Address:		City and State:				
8 ROSE ST		GRAFTON WV 26354				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	60	PROPRIETARY	07/24/87			

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:						
55	0	37				
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	46	83.6	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	44	80.0	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	45	81.8	77.5	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	52	94.5	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	72.7	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	2	3.6	5.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	17	30.9	32.4	29.3	
Completely bedfast residents.		2	3.6	1.8	3.6	
Residents confined to chairs.		43	78.2	49.4	39.1	
Residents requiring restraints.		32	58.2	43.7	31.7	
Confused or disoriented residents.		26	47.3	62.5	55.8	
Residents with bed sores.		5	9.1	5.6	4.7	
Residents receiving special skin care.		12	21.8	29.2	24.0	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
	_				

facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person. Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	NOT MET	T2			IT OF FACILITIES EQUIREMENTS	
Each resident receives proper care for injections (shots), fluids supplied through	MEI	STATE			TION	
		#	%	#	%	
and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis	MET	8	1.4	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE LINCOLN CONTNS CARE CTR

Street Address:		City and State:	
200 MONDAY DR		HAMLIN WV 25523	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	10/30/87

SELECTED RESIDENT CHARACTERISTICS							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
49	0		4	3			
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION		
highly specialized care and services.	It may reflect the facility of ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	45	91.8	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	40	81.6	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	36	73.5	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	27	55.1	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	28	57.1	71.8	59.1		
Desidents on individually written because	and bladder sets initiating manager	6	12.2	5.6	6.1		
Residents on individually written bowel a	and bladder retraining program.	0	12.2	3.0	0.1		
-		10	00.5	00.4	00.0		
Residents receiving tube feedings or re-	quiring assistance with eating.	13	26.5	32.4	29.3		
Completely bedfast residents.		0	0.0	1.8	3.6		
Residents confined to chairs.		24	49.0	49.4	39.1		
		10	26.7	40.7	21.7		
Residents requiring restraints.		18	36.7	43.7	31.7		
Confused or disoriented residents.		19	38.8	62.5	55.8		
Residents with bed sores.		3	6.1	5.6	4.7		
		10	00.4	00.0	04.0		
Residents receiving special skin care.		10	20.4	29.2	24.0		

was delicient in the indicated area at the time of the survey.	1				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FAC NOT MEETING REQUIREME			
		ST	ATE	NAT	ION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		Y NUMBER & PERCENT NOT MEETING REQ				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NATION		
deficiency may represent an origing problem of a one-time failure of a single stan person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE PINE VIEW CONT CARE

Street Address:		City and State:	
400 MCKINLEY ST		HARRISVILLE WV 26362	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	NON-PROFIT OTHER	08/10/87

SELECTEL	RESIDENT CHARACTERIST	ICS				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
60 0			47			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate car-		FAC	ILITY	STATE	NATION	
highly specialized care and services.	E. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	28	46.7	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	60	100	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	60	100	77.5	63.4	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	48	80.0	80.9	66.0	
Continence						
Residents with catheters or partial or total loss of bowel or bladder control.			73.3	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	2	3.3	5.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	24	40.0	32.4	29.3	
Completely bedfast residents.		1	1.7	1.8	3.6	
Residents confined to chairs.		5	8.3	49.4	39.1	
Residents requiring restraints.		25	41.7	43.7	31.7	
-						
Confused or disoriented residents.		38	63.3	62.5	55.8	
The second of th						
Residents with bed sores.		6	10.0	5.6	4.7	
- Constitution of States						
Residents receiving special skin care.		23	38.3	29.2	24.0	
inesidents receiving special skill care.	-		30.0			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			NUMBER & PERCEING F		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	мет	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	NOT MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	МЕТ	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				IT OF FACILITIES	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE DENMAR HOSPITAL

Street Address:		City and State:	
ROUTE 1 BOX 108		HILLSBORO WV 24946	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	155	STATE GOVERNMENT	09/23/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
126	126 0		114					
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	94	74.6	83.2	78.3			
Dressing								
Residents requiring some or total assist	ance in dressing.	116	92.1	86.8	76.7			
Toileting								
Residents requiring some or total assist	ance in toileting.	108	85.7	77.5	63.4			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	102	81.0	80.9	66.0			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	106	84.1	71.8	59.1			
Residents on individually written bowel a	and bladder retraining program.	1	0.8	5.6	6.1			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	60	47.6	32.4	29.3			
Completely bedfast residents.		0	0.0	1.8	3.6			
Residents confined to chairs.		87	69.0	49.4	39.1			
Residents requiring restraints.		39	31.0	43.7	31.7			
Confused or disoriented residents.		93	73.8	62.5	55.8			
Residents with bed sores.		15	11.9	5.6	4.7			
Residents receiving special skin care.		49	38.9	29.2	24.0			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	NOT MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE HILLTOP HEALTH CARE CTR

Street Address:		City and State:	
SADDLE SHOP RD PO DRAWER 296		HILLTOP WV 25855	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	12/31/87

	RESIDENT CHARACTERIST						
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
112		89					
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	108	96.4	84.9	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	104	92.9	90.0	83.2		
Toileting	3						
Residents requiring some or total assist	ance in toileting.	99	88.4	85.1	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	84	75.0	87.3	77.2		
Continence					-		
Residents with catheters or partial or to	tal loss of bowel or bladder control.	98	87.5	76.9	68.2		
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	50	44.6	47.4	37.7		
Completely bedfast residents.		16	14.3	2.9	3.4		
Residents confined to chairs.		72	64.3	58.4	50.8		
Residents requiring restraints.		79	70.5	51.1	41.3		
-							
Confused or disoriented residents.		75	67.0	63.4	58.4		
Residents with bed sores.		4	3.6	6.8	7.1		
Residents receiving special skin care.		9	8.0	33.4	31.2		
residents receiving special skill care.		1	0.0				

was deficient in the indicated area at the time of the survey.					
facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FAC NOT MEETING REQUIREME			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		NAT	ION
endency may represent an ongoing problem of a one-time failure of a single stan person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	МЕТ	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
	1		1		1

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	мет	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	мет	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	мет	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	

NURSING HOME PROFILE SUMMERS CNTY CONT CARE CNTR

Street Address:		City and State:	
P O BOX 1240		HINTON WV 25951	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	PROPRIETARY	01/07/88

SELECTED	RESIDENT CHARACTERIST	ics			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
106	0	88			
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
esidents are receiving appropriate or inappropriate car- nighly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	15	14.2	83.2	78.3
Pressing					
Residents requiring some or total assist	ance in dressing.	90	84.9	86.8	76.7
Foileting					
Residents requiring some or total assist	ance in toileting.	76	71.7	77.5	63.4
Fransferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	73	68.9	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	63	59.4	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	2	1.9	5.6	6.1
ating					
Residents receiving tube feedings or rec	quiring assistance with eating.	47	44.3	32.4	29.3
Completely bedfast residents.		2	1.9	1.8	3.6
Residents confined to chairs.		43	40.6	49.4	39.1
Residents requiring restraints.		41	38.7	43.7	31.7
The state of the s					
Confused or disoriented residents.		60	56.6	62.5	55.8
Residents with bed sores.		6	5.7	5.6	4.7
Residents receiving special skin care.		79	74.5	29.2	24.0
ricordento receiving special skill cale.			1		

was deficient in the indicated area at the time of the survey.		1			
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			NUMBER & PERCEI NOT MEETING R		
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A leficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT		
	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
			-			

NURSING HOME PROFILE SUMMERS CNTY HOSP SNF

Street Address:		City and State:	
PO BOX 940 TERRACE ST		HINTON WV 25951	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	20	LOCAL GOVERNMENT	09/27/87

SELECIEL	HESIDENI CHANACIENISI	100				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
5	0					
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	5	100	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	5	100	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	5	100	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	5	100	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	5	100	76.9	68.2	
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	0	0.0	47.4	37.7	
Completely bedfast residents.		0	0.0	2.9	3.4	
Residents confined to chairs.		5	100	58.4	50.8	
Residents requiring restraints.		2	40.0	51.1	41.3	
-						
Confused or disoriented residents.		3	60.0	63.4	58.4	
Residents with bed sores.		0	0.0	6.8	7.1	
Residents receiving special skin care.		0	0.0	33.4	31.2	
		-L				

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STA	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	мет	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	•6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
				1	

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented pelow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REQUIREM	
		STATE		NAT	ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	%	#	%
and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE HOPEMONT HOSPITAL

	OFFINIONI	HUSPITAL	•
Street Address:		City and State:	
BOX 330		HOPEMONT WV 25764	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	98	STATE GOVERNMENT	03/15/88

SELECTEL	RESIDENT CHARACTERIST	ICS			
Total Residents on Day of Survey:	Medicare Residents:	Medica			
69	0				
Caution: A large number of residents with these charac		FAC	FACILITY STA		NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the lacinty's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	37	53.6	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	50	72.5	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	35	50.7	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	57	82.6	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	29	42.0	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	12	17.4	5.6	6.1
Eating	<u> </u>				***
Residents receiving tube feedings or rec	auirina assistance with eating.	22	31.9	32.4	29.3
	4				
Completely bedfast residents.		4	5.8	1.8	3.6
- marcas, and a second					
Residents confined to chairs.		23	33.3	49.4	39.1
ricoldente commed to chairs.					
Residents requiring restraints.		15	21.7	43.7	31.7
nesidents requiring restraints.		10	21.7	10.1	
Operational and discriminate discriminate		40	58.0	62.5	55.8
Confused or disoriented residents.		40	30.0	02.5	33.0
			4.0	5.6	4.7
Residents with bed sores.		3	4.3	5.6	4.7
		_	10.1		04.0
Residents receiving special skin care.		7	10.1	29.2	24.0

was deficient in the indicated area at the time of the survey.	7				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITI NOT MEETING REOUIREMENTS			
elow does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	NOT MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	TE NAT	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

07/30/87

NURSING HOME PROFILE FAIRHAVEN REST HOME

Street Address:

302 ADAMS AVENUE

HUNTINGTON WV 25701

Participation:

of Beds: Type of Ownership: Survey Date:

SELECTED RESIDENT CHARACTERISTICS

PROPRIETARY

41

MEDICARE/MEDICAID SNF/ICF

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
41	0	34			
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FACILITY		STATE	NATION
highly specialized care and services.	That follow the facility's ability to provide	#	%	%	%
Bathing		!			
Residents requiring some or total assista	ance in bathing.	40	97.6	84.9	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	37	90.2	90.0	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	31	75.6	85.1	73.8
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	20	48.8	87.3	77.2
Continence					
Residents with catheters or partial or tot	al loss of bowel or bladder control.	25	61.0	76.9	68.2
·					
Residents on individually written bowel a	and bladder retraining program.	2	4.9	5.2	4.6
Eating	3, 3,				
Residents receiving tube feedings or rec	quiring assistance with eating.	4	9.8	47.4	37.7
	, , , , , , , , , , , , , , , , , , , ,				
Completely bedfast residents.		1	2.4	2.9	3.4
Residents confined to chairs.		7	17.1	58.4	50.8
Residents requiring restraints.		12	29.3	51.1	41.3
·					
Confused or disoriented residents.		11	26.8	63.4	58.4
Residents with bed sores.		2	4.9	6.8	7.1
Residents receiving special skin care.		3	7.3	33.4	31.2

was deficient in the indicated area at the time of the survey.				*******	
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REQUIREM	
		ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	МЕТ	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	МЕТ	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	МЕТ	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

leminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented elow does not reflect the severity or the duration of the problems leading to a deficiency. A eficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	ST #	ATE %	NAT	ION %
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE HILLVIEW NRS & REHAB CENTER

Street Address:		City and State:	
1720 17 ST		HUNTINGTON WV 25701	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	186	PROPRIETARY	12/04/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
186	9				
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FACILITY STATE N		NATION	
residents are receiving appropriate or inappropriate care nighly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	153	82.3	84.9	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	166	89.2	90.0	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	145	78.0	85.1	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	152	81.7	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	129	69.4	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	22	11.8	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	75	40.3	47.4	37.7
Completely bedfast residents.		1	0.5	2.9	3.4
Residents confined to chairs.		136	73.1	58.4	50.8
Residents requiring restraints.		57	30.6	51.1	41.3
Confused or disoriented residents.		98	52.7	63.4	58.4
Residents with bed sores.		11	5.9	6.8	7.1
Residents receiving special skin care.		1	0.5	33.4	31.2

was delicient in the indicated area at the time of the survey.	1				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NAT	ION		
deliciency may represent an ongoing problem of a one-time failure of a single start person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

deficiency may represent an ongoing problem or a one-time failure of a single staff person. Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/lieostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary. Drugs are administered according to the written orders of the attending physician. Met	Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA REQUIREM	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/lieostomy, respiratory (breathing) and trachectomy care, suctioning multiple colostomy/lieostom	below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	1 1	0		+	
functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary. MET 10 21.7 1662 17. Drugs are administered according to the written orders of the attending physician. Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the Not MET 4 8.7 1389 14. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. MET 1 2.2 587 6. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuis, including religious activities of the resident's choice, if arry. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 11 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24. The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning					11.9
Specific self-help devices are available when necessary. MET 10 21.7 1662 17.1 Drugs are administered according to the written orders of the attending physician. MOT MET 21 45.7 2739 29.1 Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the Not MET 4 8.7 1389 14. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. MET 1 2.2 587 6. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. All common resident areas are clean, sanitary, and free of odors. All common resident areas are clean, sanitary and free of odors. All common resident areas are clean, sanitary and free of odors. All essential mechanical and electrical equipment is maintained in safe operating condition. NOT MET 1 2 3.9 1041 11. Resident care equipment is clean and maintained in safe operating condition. NOT MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary		MET	4	8.7	2045	21.6
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Reagearch Council, National Academy of Sciencess. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. MET 1 2.2 587 6. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. NOT MET 1 2 26.1 1216 12. All common resident areas are clean, sanitary, and free of odors. NOT MET 1 2 26.1 1216 12. All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 3 6.5 1408 14. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary		MET	10	21.7	1662	17.6
accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. MET 1 2.2 587 6. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. Toilet and bath facilities are clean, sanitary, and free of odors. NOT MET 1 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. NOT MET 4 8.7 1413 14. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24. The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
with accepted professional practices by qualified therapists or qualified assistants. MET 1 2.2 587 6. Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. NOT MET 12 26.1 1210 13. Toilet and bath facilities are clean, sanitary, and free of odors. All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. MET 3 6.5 1408 14. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary	accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the	NOT MET	4	8.7	1389	14.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. Toilet and bath facilities are clean, sanitary, and free of odors. NOT MET 12 26.1 1216 12. All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14. The facility has available at all times a quantity of linen essential for proper care and comfort of residents. NOT MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary		MET	1	2.2	587	6.2
and inferests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. Toilet and bath facilities are clean, sanitary, and free of odors. NOT MET 12 26.1 1216 12. All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. NOT MET 4 8.7 1413 14. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24. The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary	Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6
according to the instructions of the attending physician. NOT MET 8 17.4 1270 13. Toilet and bath facilities are clean, sanitary, and free of odors. NOT MET 12 26.1 1216 12. All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11. All essential mechanical and electrical equipment is maintained in safe operating condition. NOT MET 4 8.7 1413 14. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24. The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary	and interests of each resident. It is designed to promote opportunities for engaging	NOT MET	14	30.4	1099	11.6
All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11.1 All essential mechanical and electrical equipment is maintained in safe operating condition. NOT MET 4 8.7 1413 14.1 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.1 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.1 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.1 Food is stored, refrigerated, prepared, distributed, and served under sanitary	Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4
All essential mechanical and electrical equipment is maintained in safe operating condition. NOT MET 4 8.7 1413 14. Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14. Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24. The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.	Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9
Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.1 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.1 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.1	All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 3 6.5 1408 14.5 NOT MET 17 37.0 2340 24.5 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.5		NOT MET	4	8.7	1413	14.9
The facility has available at all times a quantity of linen essential for proper care and comfort of residents. NOT MET 17 37.0 2340 24. The facility has available at all times a quantity of linen essential for proper care and comfort of residents. 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary	Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
comfort of residents. MET 3 6.5 700 7. Food is stored, refrigerated, prepared, distributed, and served under sanitary	Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
	The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
		NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE PRESBYTERIAN MANOR

Street Address:

101 13TH STREET

Participation:

of Beds: Type of Ownership:

MEDICARE/MEDICAID SNF/ICF

120

NON-PROFIT RELIGIOUS

10/30/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
115	9					
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FACILITY STATE		NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reliect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assists	ance in bathing.	108	93.9	84.9	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	44	38.3	90.0	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	103	89.6	85.1	73.8	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	106	92.2	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	93	80.9	76.9	68.2	
Residents on individually written bowel a	and bladder retraining program.	12	10.4	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	71	61.7	47.4	37.7	
Completely bedfast residents.		21	18.3	2.9	3.4	
Residents confined to chairs.		49	42.6	58.4	50.8	
Residents requiring restraints.		66	57.4	51.1	41.3	
-						
Confused or disoriented residents.		53	46.1	63.4	58.4	
Residents with bed sores.		1	0.9	6.8	7.1	
Residents receiving special skin care.		19	16.5	33.4	31.2	

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
			1	1	

	.,					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented pelow does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	FACILITIES EMENTS	
		СТ	^ TC	NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	ATE %	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	мет	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	
Positive The Control of the Control	,					

NURSING HOME PROFILE AMERICARE PUTNAM NSG & REHAB CTR

Street Address:		City and State:	
300 SEVILLE ROAD		HURRICANE WV 25526	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	09/28/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
113	3		9	1		
Caution: A large number of residents with these characteristics		FACILITY STATE N		NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	# % %			%	
Bathing						
Residents requiring some or total assista	ance in bathing.	111	98.2	84.9	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	113	100	90.0	83.2	
Toileting	-					
Residents requiring some or total assista	ance in toileting.	95	84.1	85.1	73.8	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	110	97.3	87.3	77.2	
Continence						
Residents with catheters or partial or to	al loss of bowel or bladder control.	79	69.9	76.9	68.2	
Residents on individually written bowel a	and bladder retraining program.	3	2.7	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	50	44.2	47.4	37.7	
Completely bedfast residents.		3	2.7	2.9	3.4	
Residents confined to chairs.		67	59.3	58.4	50.8	
Residents requiring restraints.		59	52.2	51.1	41.3	
Toolianie						
Confused or disoriented residents.		98	86.7	63.4	58.4	
Residents with bed sores.		2	1.8	6.8	7.1	

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			ENT OF FA REQUIREM			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	STATE		ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		Y NUMBER & PERCENT OF NOT MEETING REQUI				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	мет	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8	

NURSING HOME PROFILE CARE HAVEN OF TEAYS VALLEY

Street Address:		City and State:	
RT 1, BOX 205		HURRICANE WV 25526	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	90	PROPRIETARY	09/11/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
87	0	74				
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	77	88.5	83.2	78.3	
Dressing						
Residents requiring some or total assista	ance in dressing.	73	83.9	86.8	76.7	
Toileting						
Residents requiring some or total assista	ance in toileting.	65	74.7	77.5	63.4	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	84	96.6	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	52	59.8	71.8	59.1	
Residents on individually written bowel a	and bladder retraining program.	9	10.3	5.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	17	19.5	32.4	29.3	
Completely bedfast residents.		1	1.1	1.8	3.6	
Residents confined to chairs.	-	35	40.2	49.4	39.1	
Residents requiring restraints.		59	67.8	43.7	31.7	
Confused or disoriented residents.		48	55.2	62.5	55.8	
Residents with bed sores.		5	5.7	5.6	4.7	
Residents receiving special skin care.		35	40.2	29.2	24.0	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		T STATE		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	МЕТ	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			ATE		ION
——————————————————————————————————————	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE CRESTVIEW MANOR

Street Address:		City and State:				
PO BOX 40		JANE LEW WV 26378				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICE	66	PROPRIETARY	02/19/88			

Total Residents on Day of Survey:	Medicare Residents:	Medicald Residents:					
58	0	28					
Caution: A large number of residents with these chara-	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing		İ					
Residents requiring some or total assist	ance in bathing.	54	93.1	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	41	70.7	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	52	89.7	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	51	87.9	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	34	58.6	71.8	59.1		
·					, ,		
Residents on individually written bowel	and bladder retraining program.	1	1.7	5.6	6.1		
Eating			-				
Residents receiving tube feedings or re-	quiring assistance with eating.	19	32.8	32.4	29.3		
Completely bedfast residents.		5	8.6	1.8	3.6		
			-				
Residents confined to chairs.		24	41.4	49.4	39.1		
Residents requiring restraints.		31	53.4	43.7	31.7		
Confused or disoriented residents.		42	72.4	62.5	55.8		
Residents with bed sores.		1	1.7	5.6	4.7		
Residents receiving special skin care.		5	8.6	29.2	24.0		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FACILITIES REQUIREMENTS	
		ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a offe-time failure of a stringle staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	мет	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	мет	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	NOT MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	мет	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	МЕТ	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE HEARTLAND OF KEYSER

Street Address:

P O BOX 964

City and State:

KEYSER WV 26726

Participation: # of Beds: Type of Ownership: Survey Date:

MEDICAID ICF 120 PROPRIETARY 02/26/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
119	0	91			
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	119	100	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	104	87.4	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	98	82.4	77.5	63.4
Transferring	and making from had to about out a				
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	103	86.6	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	66	55.5	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	41	34.5	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		54	45.4	49.4	39.1
Residents requiring restraints.		70	58.8	43.7	31.7
-					
Confused or disoriented residents.		82	68.9	62.5	55.8
Residents with bed sores.		3	2.5	5.6	4.7
Residents receiving special skin care.		8	6.7	29.2	24.0

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				T OF FACILITIES QUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NATION		
deficiency may represent an ongoing problem of a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency, may represent an opposing problem or a ope-time failure of a single staff person				ENT OF FA REOUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	% .
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE HEARTLAND OF PRESTON COUNTY

Street Address:		City and State:	
300 MILLER ROAD		KINGWOOD WV 26537	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	06/05/87

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
109	0	109						
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FACILITY STATE		NATION				
highly specialized care and services.	s. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	101	92.7	84.9	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	101	92.7	90.0	83.2			
Toileting								
Residents requiring some or total assista	ance in toileting.	101	92.7	85.1	73.8			
Transferring								
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	101	92.7	87.3	77.2			
Continence								
Residents with catheters or partial or total loss of bowel or bladder control.			72.5	76.9	68.2			
Transfer of the second of the	Mario 3. 2000 3. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	79						
Residents on individually written bowel a	and bladder retraining program.	3	2.8	5.2	4.6			
Eating	21. 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -							
Residents receiving tube feedings or rec	guiring assistance with eating	78	71.6	47.4	37.7			
Theoretical receiving table recainings of rec	quining assistance with catting.							
Completely bedfast residents.		1	0.9	2.9	3.4			
Completely bediast residents.								
Residents confined to chairs.		57	52.3	58.4	50.8			
nesidents commed to chairs.		0,	02.0	00.1				
Donish at a security of the second		38	34.9	51.1	41.3			
Residents requiring restraints.		30	34.9	31.1	41.5			
		0.7	70.0	60.4	E0.4			
Confused or disoriented residents.		87	79.8	63.4	58.4			
Residents with bed sores.		6	5.5	6.8	7.1			
Residents receiving special skin care.		24	22.0	33.4	31.2			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		/ NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	/// %	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	МЕТ	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	NOT MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	МЕТ	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE %		NAT	ION %
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	МЕТ	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE LAKIN HOSPITAL

Street Address:		City and State:	
PO BOX 570		LAKIN WV 25250	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	136	STATE GOVERNMENT	04/03/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
110	0	73			
Caution: A large number of residents with these characteristics does not indicate whether those		FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	90	81.8	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	82	74.5	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	59	53.6	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	59	53.6	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		85	77.3	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	14	12.7	5.6	6.1
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	34	30.9	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		43	39.1	49.4	39.1
Residents requiring restraints.		13	11.8	43.7	31.7
Confused or disoriented residents.		58	52.7	62.5	55.8
Residents with bed sores.		2	1.8	5.6	4.7
11000000					
Residents receiving special skin care.		34	30.9	29.2	24.0
residents receiving special skill care.					

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	NOT MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	NOT MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	# 1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	мет	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	мет	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE GREENBRIER MANOR

	POB 266 LEWISBURG WV 24901					
Street Address:		City and State:				
POB 266		LEWISBURG WV 24901				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	100	NON-PROFIT OTHER	12/18/87			

SELECTED	RESIDENT CHARACTERIST	ics				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
96	0		66			
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION	
esidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide ighly specialized care and services.		#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	89	92.7	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	88	91.7	86.8	76.7	
Toileting						
Residents requiring some or total assist	ance in toileting.	88	91.7	77.5	63.4	
Transferring	and a second of the second of					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	86	89.6	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	88	91.7	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	21	21.9	5.6	6.1	
Eating						
Residents receiving tube feedings or red	quiring assistance with eating.	41	42.7	32.4	29.3	
Completely bedfast residents.		1	1.0	1.8	3.6	
Residents confined to chairs.		82	85.4	49.4	39.1	
Residents requiring restraints.		56	58.3	43.7	31.7	
Confused or disoriented residents.	·	83	86.5	62.5	55.8	
Residents with bed sores.		4	4.2	5.6	4.7	
Residents receiving special skin care.		30	31.3	29.2	24.0	

teminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented			R & PERCE MEETING I		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT			NAT	ION
deliciency may represent an ongoing problem of a one-time failure of a single stan person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5,	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		FACILITY NUMBER & PERCEI MET/ NOT MEETING R					
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		 	ION		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7		
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7		
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	8	11.3	601	11.0		
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3		
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1		
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9		
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7		
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8		
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8		
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4		
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4		
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0		
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0		
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0		
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9		
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8		

NURSING HOME PROFILE SPRINGFIELD COMPREHENSIVE CARE CENTER

Street Address:		City and State:	
RT. 1 BOX 101A		LINDSIDE WV 24951	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	11/20/87

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medic			
5	0)		
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	4	80.0	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	5	100	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	5	100	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	5	100	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	4	80.0	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	0	0.0	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		1	20.0	49.4	39.1
Residents requiring restraints.		2	40.0	43.7	31.7
-					
Confused or disoriented residents.		2	40.0	62.5	55.8
Residents with bed sores.		1	20.0	5.6	4.7
Residents receiving special skin care.		1	20.0	29.2	24.0
		1		1	1

was deticient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration the problems leading to a deficiency. A deficiency may represent an engaging problem or a one-time failure of a single staff person.				ENT OF FA	
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	, 601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE LOGAN HEALTH VILLAGE

Street Address:		City and State:	
P.O. BOX 540		LOGAN WV 25601	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	04/07/88

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resid	dents:				
2	0		()				
Caution: A large number of residents with these char residents are receiving appropriate or inappropriate or		FAC	ILITY	STATE	NATION			
highly specialized care and services.	are. It may renect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assis	stance in bathing.	2	100	83.2	78.3			
Dressing								
Residents requiring some or total assis	stance in dressing.	2	100	86.8	76.7			
Toileting								
Residents requiring some or total assis	stance in toileting.	2	100	77.5	63.4			
Transferring								
Residents requiring some or total assist tub or toilet.	stance moving from bed to chair or to	2	100	80.9	66.0			
Continence								
Residents with catheters or partial or t	otal loss of bowel or bladder control.	1	50.0	71.8	59.1			
Residents on individually written bowe	l and bladder retraining program.	0	0.0	5.6	6.1			
Eating								
Residents receiving tube feedings or re	equiring assistance with eating.	2	100	32.4	29.3			
Completely bedfast residents.		0	0.0	1.8	3.6			
Residents confined to chairs.		0	0.0	49.4	39.1			
Residents requiring restraints.		0	0.0	43.7	31.7			
Confused or disoriented residents.		2	100	62.5	55.8			
Residents with bed sores.		1	50.0	5.6	4.7			
Residents receiving special skin care.		1	50.0	29.2	24.0			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACIL NOT MEETING REQUIREMEN			
low does not reflect the severity or the duration of the problems leading to a deficiency. A		ST	ATE	NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	МЕТ	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A		ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	МЕТ	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	МЕТ	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	МЕТ	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	МЕТ	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	МЕТ	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE LOGAN PARK CARE CNTR INC

Street Address:City and State:P O BOX 990LOGAN WV 25601Participation:# of Beds:Type of Ownership:Survey Date:

MEDICAID ICF 120 PROPRIETARY 08/27/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
115	0		9	9		
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NOITAN	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	106	92.2	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	91	79.1	86.8	76.7	
Toileting						
Residents requiring some or total assista	ance in toileting.	75	65.2	77.5	63.4	
Transferring						
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	82	71.3	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	88	76.5	71.8	59.1	
Residents on individually written bowel a	and bladder retraining program.	10	8.7	5.6	6.1	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	58	50.4	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		60	52.2	49.4	39.1	
Residents requiring restraints.		58	50.4	43.7	31.7	
Confused or disoriented residents.		91	79.1	62.5	55.8	
Residents with bed sores.		8	7.0	5.6	4.7	
Residents receiving special skin care.		19	16.5	29.2	24.0	

FACILITY MET/				
NOT	STATE		NAT	ION
MET	#	%	#	%
MET	1	1.4	65	1.2
MET	6	8.5	198	3.6
MET	1	1.4	79	1.4
MET	26	36.6	564	10.3
MET	19	26.8	798	14.6
MET	2	2.8	25	0.5
MET	6	8.5	89	1.6
MET	0	0.0	0	0.0
MET	1	1.4	25	0.5
MET	0	0.0	0	0.0
MET	5	7.0	335	6.1
MET	22	31.0	1187	21.7
MET	5	7.0	679	12.4
MET	6	8.5	382	7.0
MET	16	22.5	807	14.8
MET	4	5.6	700	12.8
	MET/NOT MET MET MET MET MET MET MET MET	MET/ NOT ST # # NOT ST # MET	MET/ NOT MEETING STATE # % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % % %	MET

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			ENT OF FA		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT			NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	.601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	МЕТ	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	МЕТ	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	мет	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8
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NURSING HOME PROFILE POCAHONTAS CONTINUOUS CARE CTR

Street Address:		City and State:	
RR1 BOX 500		MARLINTON WV 24954	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	64	PROPRIETARY	03/10/88

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:							
64	0		51			51		1	
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION				
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%				
Bathing									
Residents requiring some or total assist	ance in bathing.	50	78.1	83.2	78.3				
Dressing									
Residents requiring some or total assist	ance in dressing.	54	84.4	86.8	76.7				
Toileting									
Residents requiring some or total assist	ance in toileting.	54	84.4	77.5	63.4				
Transferring									
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	64	100	80.9	66.0				
Continence									
Residents with catheters or partial or to	tal loss of bowel or bladder control.	48	75.0	71.8	59.1				
Residents on individually written bowel	and bladder retraining program.	1	1.6	5.6	6.1				
Eating	A760.								
Residents receiving tube feedings or re-	quiring assistance with eating.	23	35.9	32.4	29.3				
Completely bedfast residents.		0	0.0	1.8	3.6				
Residents confined to chairs.		28	43.8	49.4	39.1				
Residents requiring restraints.		38	59.4	43.7	31.7				
Confused or disoriented residents.		43	67.2	62.5	55.8				
Residents with bed sores.		5	7.8	5.6	4.7				
Residents receiving special skin care.		8	12.5	29.2	24.0				

was deficient in the indicated area at the time of the survey.	.,					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A		STATE		TAN	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	мет	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	мет	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	мет	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	МЕТ	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	МЕТ	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	
			•			

Reminder: These 32 selected performance indicators do not represent all the requirements a		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
facility must meet. There are over 500 separate requirements. The information presented	MET/					
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE %		NAT		
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	МЕТ	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	

NURSING HOME PROFILE MARMET HEALTH CARE CNTR

Street Address:		City and State:	
1 SUTPHIN DR DRAWER J		MARMET WV 25313	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	62	PROPRIETARY	01/21/88

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:		
58	0		3	19		
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	53	91.4	83.2	78.3	
Dressing						
Residents requiring some or total assista	ance in dressing.	52	89.7	86.8	76.7	
Toileting						
Residents requiring some or total assista	ance in toileting.	47	81.0	77.5	63.4	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	49	84.5	80.9	66.0	
Continence				 		
Residents with catheters or partial or to	ral loss of bowel or bladder control	47	81.0	71.8	59.1	
Trestastile Will cameters of partial of to	arriode of bower of bladder control.					
Residents on individually written bowel a	and bladder retraining program	0	0.0	5.6	6.1	
Eating	and bladder retraining program.					
Residents receiving tube feedings or rec	wiring assistance with eating	4	6.9	32.4	29.3	
Tresidents receiving table recuings of rec	during assistance with cating.					
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		14	24.1	49.4	39.1	
Residents requiring restraints.		26	44.8	43.7	31.7	
-						
Confused or disoriented residents.		45	77.6	62.5	55.8	
Residents with bed sores.		4	6.9	5.6	4.7	
Residents receiving special skin care.		14	24.1	29.2	24.0	

facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	мет	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	мет	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCE			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	МЕТ	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
		1				

NURSING HOME PROFILE CARE HAVEN OF BERKELEY

Street Address: City and State:		City and State:	
RT. 5, BOX A-167		MARTINSBURG WV 25401	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	01/27/88

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
15	0	0						
Caution: A large number of residents with these characteristics does not indicate whether those residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide		FAC	ILITY	STATE	NATION			
highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	15	100	83.2	78.3			
Dressing								
Residents requiring some or total assist	ance in dressing.	15	100	86.8	76.7			
Toileting								
Residents requiring some or total assist	ance in toileting.	13	86.7	77.5	63.4			
Transferring								
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	12	80.0	80.9	66.0			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	13	86.7	71.8	59.1			
·								
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1			
Eating	31 - 3 - 3							
Residents receiving tube feedings or rec	quiring assistance with eating	1	6.7	32.4	29.3			
The state in the serving table localings of the	quining acciditation with dating.							
Completely bedfast residents.		0	0.0	1.8	3.6			
Completely bediast residents.			0.0	110	0.0			
Decidents confined to chaire		1	6.7	49.4	39.1			
Residents confined to chairs.		•	0.7	40.4	00.1			
Baridania and the		7	46.7	43.7	31.7			
Residents requiring restraints.		· · ·	40.7	43.7	31.7			
			60.0	CO. F	55.0			
Confused or disoriented residents.		9	60.0	62.5	55.8			
Residents with bed sores.		1	6.7	5.6	4.7			
Residents receiving special skin care.		2	13.3	29.2	24.0			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
		STATE		NATIO	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4:	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	- 8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE HEARTLAND OF MARTINSBURG

Street Address:		City and State:	
210 CLOVER ST		MARTINSBURG WV 25401	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	116	PROPRIETARY	05/21/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
114	0		6	66		
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATIO	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	114	100	84.9	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	98	86.0	90.0	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	89	78.1	85.1	73.8	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	90	78.9	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	73	64.0	76.9	68.2	
Residents on individually written bowel a	and bladder retraining program.	2	1.8	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	43	37.7	47.4	37.7	
Completely bedfast residents.		0	0.0	2.9	3.4	
Residents confined to chairs.		90	78.9	58.4	50.8	
Residents requiring restraints.		63	55.3	51.1	41.3	
Confused or disoriented residents.		63	55.3	63.4	58.4	
Residents with bed sores.		4	3.5	6.8	7.1	
Residents receiving special skin care.		114	100	33.4	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	МЕТ	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
		L			L

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A					NT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		+	ION	
Each resident receives proper care for injections (shots), fluids supplied through	MET	#	%	#	%	
tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	мет	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	

NURSING HOME PROFILE ST BARBARA MEM NURSING HOME

9:27						
Street Address:		City and State:				
P O BOX 86		MONONGAH WV 26554				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICARE/MEDICAID SNE/ICE	57	NON-PROFIT RELIGIOUS	01/28/88			

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
57	0	18			
Caution: A large number of residents with these characteristics		FAC	ILITY	ITY STATE	
esidents are receiving appropriate or inappropriate care nighly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	53	93.0	84.9	81.5
Dressing					
Residents requiring some or total assista	ance in dressing.	53	93.0	90.0	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	51	89.5	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	55	96.5	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	42	73.7	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	22	38.6	47.4	37.7
Completely bedfast residents.		1	1.8	2.9	3.4
Residents confined to chairs.		21	36.8	58.4	50.8
Residents requiring restraints.		42	73.7	51.1	41.3
Confused or disoriented residents.		38	66.7	63.4	58.4
Residents with bed sores.		3	5.3	6.8	7.1
			71.9	33.4	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT C NOT MEETING REQU				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
				NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	#	ATE %	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	мет	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	мет	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	мет	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	мет	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	мет	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8	

NURSING HOME PROFILE MONTGOMERY GENL ELDERLY CARE

Street Address:		City and State:			
P O BOX 1010		MONTGOMERY WV 25136			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICAID ICF	60	NON-PROFIT OTHER	07/09/87		

SELECTEL	RESIDENT CHARACTERIST	105			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
57	57 0			1	
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	49	86.0	83.2	78.3
Dressing					
Decidente vaguirina como ar total conist	anno in dracoina	54	04.7	96.9	76.7
Residents requiring some or total assist	ance in dressing.	54	94.7	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	46	80.7	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	48	84.2	80.9	66.0
Continence					
					50.4
Residents with catheters or partial or to	tal loss of bowel or bladder control.	45	78.9	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	8	14.0	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating	12	21.1	32.4	29.3
Tresidents receiving tabe reedings of rec	quillig assistance with eating.	'-		52	
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		33	57.9	49.4	39.1
Residents requiring restraints.		19	33.3	43.7	31.7
residents requiring restraints.		'		1011	
-					
Confused or disoriented residents.		40	70.2	62.5	55.8
Residents with bed sores.		0	0.0	5.6	4.7
Residents receiving special skin care.		23	40.4	29.2	24.0
nesidents receiving special skill care.			,		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION
leficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	TION
——————————————————————————————————————	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE MONTGOMERY GENL HOSP SNF/ICF

Street Address:	City and State:			
WASHINGTON ST + 6TH AVE	SHINGTON ST + 6TH AVE MONTGOMERY WV 25136			
Participation:	# of Beds:	Type of Ownership:	Survey Date:	
MEDICARE/MEDICAID SNF/ICF	35	NON-PROFIT OTHER	01/03/88	

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:				
5	0	0						
	ution: A large number of residents with these characteristics does not indicate whether those sidents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide			STATE	NATION			
highly specialized care and services.		#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	2	40.0	84.9	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	5	100	90.0	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	5	100	85.1	73.8			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	5	100	87.3	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	5	100	76.9	68.2			
Residents on individually written bowel a	and bladder retraining program	1	20.0	5.2	4.6			
Eating	g p - 2							
Residents receiving tube feedings or rec	guiring assistance with eating	1	20.0	47.4	37.7			
The side the receiving tabe recallings of rec	quiring assistance with eating.				-			
Completely bedfast residents.		0	0.0	2.9	3.4			
Completely bediast residents.			0.0	2.0	0.1			
Residents confined to chairs.		1	20.0	58.4	50.8			
nesidents commed to chairs.		<u>'</u>	20.0	00.1	00.0			
Decidents requiring restraints		3	60.0	51.1	41.3			
Residents requiring restraints.			00.0	01.1	71.0			
Confused on discussed the side was		2	40.0	63.4	58.4			
Confused or disoriented residents.			40.0	03.4	55.4			
.		4	20.0	6.8	7.1			
Residents with bed sores.		1	20.0	0.8	7.1			
			40.0	00.4	01.0			
Residents receiving special skin care.		2	40.0	33.4	31.2			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	NAT		
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8
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NURSING HOME PROFILE AMERICARE MORGANTOWN NSG & REHAB CTR

Street Address: City and State:				
995 MAPLE DR		MORGANTOWN WV 26505		
Participation:	# of Beds:	Type of Ownership:	Survey Date:	
MEDICARE/MEDICAID SNF/ICF	111	PROPRIETARY	07/09/87	

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
99	8	60			
Caution: A large number of residents with these characteristics are residents are residents are residents.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					:
Residents requiring some or total assist	ance in bathing.	87	87.9	84.9	81.5
Dressing					
Residents requiring some or total assists	ance in dressing.	95	96.0	90.0	83.2
Toileting					
Residents requiring some or total assists	ance in toileting.	89	89.9	85.1	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	86	86.9	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	65	65.7	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	3	3.0	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	40	40.4	47.4	37.7
Completely bedfast residents.		7	7.1	2.9	3.4
Residents confined to chairs.		68	68.7	58.4	50.8
Residents requiring restraints.		63	63.6	51.1	41.3
-					
Confused or disoriented residents.		62	62.6	63.4	58.4
Residents with bed sores.		7	7.1	6.8	7.1
Residents receiving special skin care.		23	23.2	33.4	31.2

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	МЕТ	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	
The second secon	_+					

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			CENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	NAT	ION
deficiency may represent an origonity problem of a one-time failure of a single stan person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8
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NURSING HOME PROFILE MORGAN MANOR CONV CTR

City and State: Street Address: 1379 VAN VOORHIS ROAD MORGANTOWN WV 26505 Participation: Type of Ownership: # of Beds: Survey Date: MEDICARE/MEDICAID SNF/ICF PROPRIETARY 100 10/02/87

SELECTED RESIDENT CHARACTERISTICS							
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resid	ents:			
95	0		90				
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	83	87.4	84.9	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	78	82.1	90.0	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	75	78.9	85.1	73.8		
Transferring Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	78	82.1	87.3	77.2		
Continence		, 0	02.1	07.0	11.2		
		70	20.4	70.0	00.0		
Residents with catheters or partial or to	tal loss of bowel or bladder control.	78	82.1	76.9	68.2		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.2	4.6		
Eating	0.1						
Residents receiving tube feedings or rec	quiring assistance with eating.	42	44.2	47.4	37.7		
Completely bedfast residents.		1	1.1	2.9	3.4		
Residents confined to chairs.		57	60.0	58.4	50.8		
Residents requiring restraints.		58	61.1	51.1	41.3		
Confused or disoriented residents.		71	74.7	63.4	58.4		
Residents with bed sores.		10	10.5	6.8	7.1		
Residents receiving special skin care.		22	23.2	33.4	31.2		

was deficient in the indicated area at the time of the survey.						
facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NATION		
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	мет	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	мет	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	NOT MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	8.7	1665	17.6	
	-4			1		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT		
- action of the street of the	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	мет	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8	

NURSING HOME PROFILE MOUND VIEW HEALTH CARE

Street Address:		City and State:	
P O BOX F		MOUNDSVILLE WV 26041	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	114	PROPRIETARY	01/29/88

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:				
110 0			66					
Caution: A large number of residents with these characterists are incorporated as incorporated	oteristics does not indicate whether those	FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	73	66.4	84.9	81.5			
Dressing								
Residents requiring some or total assist	ance in dressing.	95	86.4	90.0	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	85	77.3	85.1	73.8			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	83	75.5	87.3	77.2			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	84	76.4	76.9	68.2			
Residents on individually written bowel a	and bladder retraining program.	2	1.8	5.2	4.6			
Eating	3. 3							
Residents receiving tube feedings or red	quiring assistance with eating.	49	44.5	47.4	37.7			
Completely bedfast residents.		0	0.0	2.9	3.4			
Residents confined to chairs.		62	56.4	58.4	50.8			
Residents requiring restraints.		73	66.4	51.1	41.3			
-								
Confused or disoriented residents.		93	84.5	63.4	58.4			
Residents with bed sores.		2	1.8	6.8	7.1			
Residents receiving special skin care.		28	25.5	33.4	31.2			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE NAT		ION
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

below does not reflect the severity of the duration of the problems leading to a deficiency. A MET # NATION M	Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A					OF FACILITIES QUIREMENTS	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/lieostomy, respiratory (breathing) and tracheolomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary. MET 10 21.7 1662 17.6 Drugs are administered according to the written orders of the attending physician. Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended detary allowances of the Food and Nutritine Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. NOT MET 1 2.2 567 6.2 Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary and free of odors. MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents.			STATE		NAT	ION	
tubes, colostomy/floeotormy, respiratory (breathing) and tracheolomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in cating or drinking is provided prompt assistance. Specific self-help devices are available when necessary. MET 10 21.7 1.662 17.6 Drugs are administered according to the written orders of the attending physician. Member 21 45.7 2739 29.0 Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended clietary allowances of the Food and Nutribine Board of the National Research Council, National Academy of Sciences. Not met 1 2.2 587 6.2 Services are provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. Not met 1 2.2 587 6.2 Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. MET 8 17.4 816 8.6 An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 11 23.9 1041 11.0 All common resident areas are clean, sanitary, and free of odors. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary and free of odors. MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and confort of residents.	deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Functioning to prevent loss of ability to walk or move freely, deformities and paralysis. MET 4 8.7 2045 21.6 Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary. MET 10 21.7 1662 17.6 Drugs are administered according to the written orders of the attending physician. MET 21 45.7 2739 29.0 Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. NOT MET 1 2.2 587 6.2 Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary and free of odors. MET 3 6.5 1408 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 700 7.4 Feed devices are equipment as a quantity of linen essential for proper care and conflort of residents.	tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	6	13.0	1123	11.9	
Drugs are administered according to the written orders of the attending physician. MET 10 21.7 1662 17.6 Drugs are administered according to the written orders of the attending physician. MET 21 45.7 2739 29.0 Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council. National Research of the State of the Food and Nutrition Board of the National Research Council. National Research of the Food and Nutrition Board of the National Research Council. National Research of the Residents of the attending physician in accordance with accepted professional practices by qualified threapists or qualified assistants. NOT MET 1 2.2 587 6.2 Services are provided according to orders of the attending physician in accordance with accepted professional practices by qualified threapists or qualified assistants. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 11 23.9 1041 11.0 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and confort of residents.		MET	4	8.7	2045	21.6	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended delary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. NOT MET 1 2.2 587 6.2 Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. MET 8 17.4 816 8.6 An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 11 23.9 1041 11.0 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents.		MET	10	21.7	.1662	17.6	
accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences. Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants. NOT MET 1 2.2 587 6.2 Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 13 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET ABOUND MET ABOUND AND TO BE ABOUND AN	Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0	
with accepted professional practices by qualified therapists or qualified assistants. NOT MET 1 2.2 587 6.2 Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency. MET 8 17.4 816 8.6 An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 13 23.9 1041 11.0 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the	MET	4	8.7	1389	14.7	
facility or by referral to an appropriate social agency. MET 8 17.4 816 8.6 An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. MET 14 30.4 1099 11.6 Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 11 23.9 1041 11.0 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	1	2.2	587	6.2	
and inferests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any. Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary, and free of odors. MET 12 26.1 1216 12.9 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary		MET	8	17.4	816	8.6	
Toilet and bath facilities are clean, sanitary, and free of odors. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11.0 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	and interests of each resident. It is designed to promote opportunities for engaging	MET	14	30.4	1099	11.6	
All common resident areas are clean, sanitary and free of odors. MET 12 26.1 1216 12.9 All common resident areas are clean, sanitary and free of odors. MET 11 23.9 1041 11.0 All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
All essential mechanical and electrical equipment is maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
Resident care equipment is clean and maintained in safe operating condition. MET 4 8.7 1413 14.9 Resident care equipment is clean and maintained in safe operating condition. MET 3 6.5 1408 14.9 Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
Isolation techniques to prevent the spread of infection are followed by all personnel. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 1408 14.9 A 6.5 7.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. MET 3 6.5 700 7.4	All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents. NOT MET 17 37.0 2340 24.7 The facility has available at all times a quantity of linen essential for proper care and comfort of residents. A MET 3 6.5 700 7.4 Food is stored, refrigerated, prepared, distributed, and served under sanitary	Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary	Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
	The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
		MET	15	32.6	4050	42.8	

NURSING HOME PROFILE NEW MARTINSVILLE HLTH CARE CNTR

Street Address:		City and State: NEW MARTINSVILLE WV 26155 # of Beds: Type of Ownership: Survey Date:	
225 RUSSELL AVE		NEW MARTINSVILLE WV	26155
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	05/07/87

SELECTED	RESIDENT CHARACTERIST	ics					
Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:							
116	0		g	0			
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car.		FAC	ILITY	STATE	NATION		
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	101	87.1	84.9	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	110	94.8	90.0	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	102	87.9	85.1	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	106	91.4	87.3	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	103	88.8	76.9	68.2		
Residents on individually written bowel	and bladder retraining program.	2	1.7	5.2	4.6		
Eating	9 : 9						
Residents receiving tube feedings or re-	quiring assistance with eating.	58	50.0	47.4	37.7		
	, ,						
Completely bedfast residents.		5	4.3	2.9	3.4		
Residents confined to chairs.		90	77.6	58.4	50.8		
					-		
Residents requiring restraints.		69	59.5	51.1	41.3		
Trockering rockering.							
Confused or disoriented residents.		95	81.9	63.4	58.4		
Tomaton di dissificited residents.							
Residents with bed sores.		7	6.0	6.8	7.1		
TOOLGOING WILL BOX 30163.							
Posidonto rossivina enesial akin esea		5	4.3	33.4	31.2		
Residents receiving special skin care.			7.0	00.4	J 1.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NATIO	
penciency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

				,		
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
deficiency may represent an originity problem of a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	мет	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	NOT MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	МЕТ	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	мет	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8	

NURSING HOME PROFILE WYOMING CONT CARE CTR

	110111111111111111111111111111111111111		
Street Address:		City and State:	
PO BOX 149		NEW RICHMOND WV 24867	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	08/14/87

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
48	0		3	9	
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	48	100	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	38	79.2	86.8	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	37	77.1	77.5	63.4
Transferring					
Residents requiring some or total assistation tub or toilet.	ance moving from bed to chair or to	29	60.4	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	83.3	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	2	4.2	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	16	33.3	32.4	29.3
Completely bedfast residents.		7	14.6	1.8	3.6
Residents confined to chairs.		30	62.5	49.4	39.1
Residents requiring restraints.		23	47.9	43.7	31.7
-					
Confused or disoriented residents.		0	0.0	62.5	55.8
Residents with bed sores.		0	0.0	5.6	4.7
Residents receiving special skin care.		0	0.0	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REQUIREMENTS			
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NATION	
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	мет	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	МЕТ	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	NOT MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE			ION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	# 1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	мет	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	NOT MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	мет	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE AMERICARE ARLINGTON NSG & REHAB CTR

Street Address:		City and State:					
1716 GIHON RD		PARKERSBURG WV 26101					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICAID ICF	66	PROPRIETARY	03/01/88				

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medica	aid Resid	dents:				
64	0	31						
Caution: A large number of residents with these characresidents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION			
highly specialized care and services.	a. It flidy reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assista	ance in bathing.	56	87.5	83.2	78.3			
Dressing								
Residents requiring some or total assista	ance in dressing.	57	89.1	86.8	76.7			
Toileting								
Residents requiring some or total assista	ance in toileting.	44	68.8	77.5	63.4			
Transferring								
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	54	84.4	80.9	66.0			
Continence								
Residents with catheters or partial or total loss of bowel or bladder control.			79.7	71.8	59.1			
Residents on individually written bowel a	and bladder retraining program.	3	4.7	5.6	6.1			
Eating								
Residents receiving tube feedings or rec	quiring assistance with eating.	29	45.3	32.4	29.3			
Completely bedfast residents.		2	3.1	1.8	3.6			
Residents confined to chairs.		33	51.6	49.4	39.1			
					-			
Residents requiring restraints.		48	75.0	43.7	31.7			
Confused or disoriented residents.		42	65.6	62.5	55.8			
o distribution in the second s								
Residents with bed sores.		4	6.3	5.6	4.7			
Trooleente with Boa cores.								
Residents receiving special skin care.		12	18.8	29.2	24.0			
Tionacinto receiving special skill care.								

was delicient in the indicated area at the time of the survey.					
reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
pelow does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	NOT ST		NAT	ION
ficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/				T OF FACILITIES EQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE # %		NAT #	_	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	
Dominday, The recults of the full everyone available		-			L	

NURSING HOME PROFILE OHIO VALLEY HEALTH CARE INC

Street Address:		City and State:	
ROUTE 5 BOX 146		PARKERSBURG WV 26101	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	NON-PROFIT OTHER	01/16/87

Total Residents on Day of Survey:	Medicare Residents:	Medic	dents:		
58	0	47			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing		:			
Residents requiring some or total assista	ance in bathing.	58	100	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	58	100	86.8	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	35	60.3	77.5	63.4
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	48	82.8	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	69.0	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	2	3.4	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	19	32.8	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		27	46.6	49.4	39.1
Residents requiring restraints.		32	55.2	43.7	31.7
Confused or disoriented residents.		29	50.0	62.5	55.8
Residents with bed sores.		2	3.4	5.6	4.7
Residents receiving special skin care.		8	13.8	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
and the state of t		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	NOT MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
					1

	т				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	мет	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	мет	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE PARKVIEW HEALTHCARE CTR

TAIRTIEW HEAETHOAILE OTH							
Street Address:		City and State:					
1600 27TH ST		PARKERSBURG WV 26101					
Participation:	# of Beds:	Type of Ownership:	Survey Date:				
MEDICARE/MEDICAID SNE/ICE	155	PROPRIETARY	12/17/87				

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:							
101	4	70					
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FAC	FACILITY STATE		NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	86	85.1	84.9	81.5		
Dressing							
Residents requiring some or total assist	ance in dressing.	92	91.1	90.0	83.2		
Toileting							
Residents requiring some or total assist	ance in toileting.	87	86.1	85.1	73.8		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	86	85.1	87.3	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	87	86.1	76.9	68.2		
Residents on individually written bowel	and bladder retraining program.	1	1.0	5.2	4.6		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	38	37.6	47.4	37.7		
Completely bedfast residents.		0	0.0	2.9	3.4		
Residents confined to chairs.		90	89.1	58.4	50.8		
Residents requiring restraints.		50	49.5	51.1	41.3		
		50	E7.4	60.4	EQ.4		
Confused or disoriented residents.		58	57.4	63.4	58.4		
Decidents with had a very		9	8.9	6.8	7.1		
Residents with bed sores.		9	0.9	0.0	/.1		
Decidente receiving associal state as a		90	89.1	33.4	31.2		
Residents receiving special skin care.	The second secon	30	09.1	00.4	01.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	MET/ NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
deficiency may represent an originity problem of a orie-time failure of a single stan person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE THE WILLOWS

Street Address:		City and State:	
P.O. BOX 3374			
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	66	PROPRIETARY	01/29/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
64	0	35			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	55	85.9	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	56	87.5	86.8	76.7
Toileting					
Residents requiring some or total assists	ance in toileting.	50	78.1	77.5	63.4
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	52	81.3	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	61	95.3	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	8	12.5	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	15	23.4	32.4	29.3
Completely bedfast residents.		1	1.6	1.8	3.6
Residents confined to chairs.		52	81.3	49.4	39.1
Residents requiring restraints.		44	68.8	43.7	31.7
-					
Confused or disoriented residents.		59	92.2	62.5	55.8
Residents with bed sores.		6	9.4	5.6	4.7
Residents receiving special skin care.		28	43.8	29.2	24.0

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented			R & PERCI			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	мет	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	
					-	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	. 8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8
					L

NURSING HOME PROFILE WORTHINGTON MANOR INC

Street Address:		City and State:	
ROUTE 2 BOX 570		PARKERSBURG WV 26101	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	105	PROPRIETARY	07/02/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
104	2		6	60	
Caution: A large number of residents with these characteristics	cteristics does not indicate whether those	FACILITY		STATE	NATION
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	102	98.1	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	102	98.1	90.0	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	102	98.1	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	102	98.1	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	102	98.1	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	92	88.5	5.2	4.6
Eating					
Residents receiving tube feedings or red	quiring assistance with eating.	58	55.8	47.4	37.7
Completely bedfast residents.		2	1.9	2.9	3.4
Residents confined to chairs.		71	68.3	58.4	50.8
Residents requiring restraints.		93	89.4	51.1	41.3
Confused or disoriented residents.		93	89.4	63.4	58.4
Residents with bed sores.		7	6.7	6.8	7.1
Residents receiving special skin care.		34	32.7	33.4	31.2

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem of a one-time failure of a single stan person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE GRANT COUNTY NSG HME

Street Address:	City and State:		
27 EARLY ST		PETERSBURG WV 26847	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	LOCAL GOVERNMENT	06/18/87

SELECTED RESIDENT CHARACTERISTICS							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
59	59 0			49			
Caution: A large number of residents with these characteristics.		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	38	64.4	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	53	89.8	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	45	76.3	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	45	76.3	80.9	66.0		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.			57.6	71.8	59.1		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	24	40.7	32.4	29.3		
Completely bedfast residents.		1	1.7	1.8	3.6		
Residents confined to chairs.		27	45.8	49.4	39.1		
Residents requiring restraints.		35	59.3	43.7	31.7		
-							
Confused or disoriented residents.		28	47.5	62.5	55.8		
Residents with bed sores.		4	6.8	5.6	4.7		
Residents receiving special skin care.		1	1.7	29.2	24.0		

was deficient in the indicated area at the time of the survey.							
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented acility must meet to fleet the equarity of the direction of the problems leading to a deficiency.		ACILITY NUMBER & PERCEI MET/ NOT MEETING R					
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION		
	MET	#	%	#	%		
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2		
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6		
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4		
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3		
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6		
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5		
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6		
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0		
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5		
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0		
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1		
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7		
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4		
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0		
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8		
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8		

	FACILITY				
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		STATE			TION
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE GRANT MEMORIAL HOSP

Street Address:		City and State:	
P.O. BOX 1029		PETERSBURG WV 26847	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	96	LOCAL GOVERNMENT	06/05/87

SELECTEL	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medica	aid Resi	dents:	
9	3		(6	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	8	88.9	84.9	81.5
Dressing					
Residents requiring some or total assist	tance in dressing.	8	88.9	90.0	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	8	88.9	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	tance moving from bed to chair or to	8	88.9	87.3	77.2
Continence					
Residents with catheters or partial or to	otal loss of bowel or bladder control.	8	88.9	76.9	68.2
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6
Eating					
Residents receiving tube feedings or re	quiring assistance with eating.	8	88.9	47.4	37.7
Completely bedfast residents.		0	0.0	2.9	3.4
Residents confined to chairs.		9	100	58.4	50.8
Residents requiring restraints.		7	77.8	51.1	41.3
			-		
Confused or disoriented residents.		1	11.1	63.4	58.4
Residents with bed sores.		2	22.2	6.8	7.1
Residents receiving special skin care.		9	100	33.4	31.2

was delicient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
		STATE		NAT	TION
		#	%	#	%
Each resident receives proper care for in actions (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (tashing) and tracheotomy care, suctioning and tube feeding.	NOT MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE CARE HAVEN OF PT PLEASANT

	OATIE HAVEN OF FEEDOMINE							
Street Address:		City and State:						
RTE 1 BOX 326		POINT PLEASANT WV 255	550					
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICAID ICF	60	PROPRIETARY	11/04/87					

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
39	0		2	3	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car-		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	37	94.9	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	35	89.7	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	30	76.9	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	25	64.1	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of howal or bladder central	19	48.7	71.8	59.1
nesidents with catheters of partial of to	tal loss of bower of bladder control.	13	40.7	71.0	33.1
			0.0	- C	0.1
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1
•					
Residents receiving tube feedings or re-	quiring assistance with eating.	8	20.5	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		25	64.1	49.4	39.1
Residents requiring restraints.		3	7.7	43.7	31.7
•					
Confused or disoriented residents.		25	64.1	62.5	55.8
Residents with bed sores.		5	12.8	5.6	4.7
Residents receiving special skin care.		10	25.6	29.2	24.0
Toolaonto receiving special skiil cale.				1	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT			NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	мет	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	мет	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	мет	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	мет	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
		STATE		 	TION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	%	#	%
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	1.4	255 748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are ciean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE PLEASANT VLY NRS CARE CTR

Street Address:		City and State:	
VALLEY DR		POINT PLEASANT WV 25550	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	100	NON-PROFIT OTHER	08/07/87

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
94			7	4	
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	84	89.4	84.9	81.5
Dressing				1	
Residents requiring some or total assist	ance in dressing.	78	83.0	90.0	83.2
Toileting	3				
Residents requiring some or total assist	ance in toileting.	72	76.6	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	82	87.2	87.3	77.2
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			68.1	76.9	68.2
Residents on individually written bowel	and bladder retraining program.	1	1.1	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	41	43.6	47.4	37.7
			1		
Completely bedfast residents.		0	0.0	2.9	3.4
Residents confined to chairs.		73	77.7	58.4	50.8
Residents requiring restraints.		32	34.0	51.1	41.3
Confused or disoriented residents.		55	58.5	63.4	58.4
Residents with bed sores.		5	5.3	6.8	7.1
Residents receiving special skin care.		22	23.4	33.4	31.2

was delicient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.					OF FACILITIES UIREMENTS	
		STATE		NAT	ION	
deficiency may represent an ongoing problem of a one-time failure of a single staff person.	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.		0	0.0	201	2.1	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5	
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5	
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8	
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	NOT MET	4	8.7	1665	17.6	

facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person. Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	#	STA		NAT #	11.9
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	4	6	13.0	#	%
tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding. Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	4			1123	11.9
functioning to prevent loss of ability to walk or move freely, deformities and paralysis. Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.		4	8.7		
Specific self-help devices are available when necessary.	10			2045	21.6
WE!		0	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician. MET	2-	1	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	4	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	8	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	ET 14	4	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	ET 8	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	т 12	2	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	T 1	1	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition. MET	4	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition. MET		3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	17	7	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	Ξ Τ (3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions. MET	15	5	32.6	4050	42.8

NURSING HOME PROFILE PRINCETON HLTH CARE CNTR

Street Address:	City and State:		
315 COURT HOUSE RD		PRINCETON WV 24740	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	NON-PROFIT PRIVATE	01/22/88

	1			
0	82			
cteristics does not indicate whether those	FACILITY		STATE	NATION
e. It may reflect the facility's ability to provide	#	%	%	%
ance in bathing.	113	97.4	83.2	78.3
ance in dressing.	88	75.9	86.8	76.7
ance in toileting.	99	85.3	77.5	63.4
ance moving from had to chair or to				
ance moving nom bed to chair of to	87	75.0	80.9	66.0
al loss of bowel or bladder control.	83	71.6	71.8	59.1
and bladder retraining program.	0	0.0	5.6	6.1
uiring assistance with eating.	12	10.3	32.4	29.3
	2	1.7	1.8	3.6
	49	42.2	49.4	39.1
	23	19.8	43.7	31.7
	105	90.5	62.5	55.8
	1	0.9	5.6	4.7
	46	39.7	29.2	24.0
	ance in bathing. ance in dressing. ance in toileting. ance moving from bed to chair or to tal loss of bowel or bladder control. and bladder retraining program. quiring assistance with eating.	ance in bathing. ance in bathing. ance in dressing. ance in toileting. ance moving from bed to chair or to and bladder retraining program. and bladder retraining program. 2 49 23 105	# % ance in bathing. 113 97.4 ance in dressing. 88 75.9 ance in toileting. 99 85.3 ance moving from bed to chair or to 87 75.0 tal loss of bowel or bladder control. 83 71.6 and bladder retraining program. 0 0.0 quiring assistance with eating. 12 10.3 49 42.2 23 19.8 105 90.5	# % % % ance in bathing. ## % % % % % % % % % % % % % % % % % %

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.			NUMBER & PERCENT OF FACILIT NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	. 1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.		19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	
				1		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.		8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.		0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE HEARTLAND OF RAINELLE

	IIEMIIIEMID '	O' IIAINEEEE	
Street Address:		City and State:	
PA 16TH ST		RAINELLE WV 25962	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	59	PROPRIETARY	12/24/87

Total Residents on Day of Survey:	Medicare Residents:	icare Residents: Medicaid Residents:					
55	0	45					
Caution: A large number of residents with these characteristics.		FACILITY		STATE	NATION		
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.		#	%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	55	100	83.2	78.3		
Dressing							
Residents requiring some or total assista	ance in dressing.	47	85.5	86.8	76.7		
Toileting							
Residents requiring some or total assista	ance in toileting.	38	69.1	77.5	63.4		
Transferring							
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	24	43.6	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	36	65.5	71.8	59.1		
Residents on individually written bowel a	and bladder retraining program.	2	3.6	5.6	6.1		
Eating							
Residents receiving tube feedings or rec	quiring assistance with eating.	17	30.9	32.4	29.3		
Completely bedfast residents.		5	9.1	1.8	3.6		
Residents confined to chairs.		22	40.0	49.4	39.1		
					-		
Residents requiring restraints.		18	32.7	43.7	31.7		
Confused or disoriented residents.		32	58.2	62.5	55.8		
Residents with bed sores.		2	3.6	5.6	4.7		
Residents receiving special skin care.		42	76.4	29.2	24.0		

isably what met. There are over 500 separate requirements. The Information presented below does not reliebeth the severity or the duration of the problems fooding to a deficient. A cefficiency may represent an ongoing problem or a one-time failure of a single staff person. The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed. The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing lacility every three months. Each resident is free from mental and physical abuse. Each resident is free from mental and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Each resident without prior notification of next of kin or sponsor. The facility ensures that the health care of each resident is under the continuing supervision of a physician. MET 0 0.0.0 0.0.0.0. Emergency services from a physician are available and provided to each resident who requires emergency care. Nursing services are provided at all times to meet the needs of residents. Each resident receives daily personal hygiena as needed to assure cleanliness, good skin care, good grooming, and oral hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene as needed to assure cleanliness	Reminder: These 32 selected performance indicators do not represent all the requirements a		NUMBER & PERCENT OF FACILITIES				
delicionor, may represent an engoing problem or a one-time failure of a single staff person. MET	facility must meet. There are over 500 separate requirements. The information presented						
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Each resident is given privacy during treatment and care of personal needs. MET 26 36.6 564 10.3 Each resident is given privacy during treatment and care of personal needs. MET 19 26.8 798 14.6 Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. MET 2 2.8 25 0.5 Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. MET 6 8.5 89 1.6 Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor. The facility ensures that the health care of each resident is under the continuing supervision of a physician. MET 0 0.0 0 0.0 The facility ensures that the health care of each resident is under the continuing supervision of a physician are available and provided to each resident who requires emergency care. MET 0 0.0 0 0.0 Nursing services are provided at all times to meet the needs of residents. MET 5 7.0 335 6.1 Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. Each resident receives care necessary to prevent skin breakdown. MET 5 7.0 679 12.4 Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent tolleting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic	Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor. The facility ensures that the health care of each resident is under the continuing supervision of a physician. Emergency services from a physician are available and provided to each resident who requires emergency care. MET 0 0.0 0 0.0 Nursing services are provided at all times to meet the needs of residents. Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. Each resident receives care necessary to prevent skin breakdown. Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic		MET	26	36.6	564	10.3	
individuals of his/her choice unless this infringes upon the rights of another resident. MET 2 2.8 25 0.5	Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
as space permits. MET 6 8.5 89 1.6 Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor. The facility ensures that the health care of each resident is under the continuing supervision of a physician. MET 1 1.4 25 0.5 Emergency services from a physician are available and provided to each resident who requires emergency care. MET 0 0.0 0 0.0 Nursing services are provided at all times to meet the needs of residents. MET 5 7.0 335 6.1 Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. MET 2 31.0 1187 21.7 Each resident receives care necessary to prevent skin breakdown. MET 5 7.0 679 12.4 Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic			2	2.8	25	0.5	
treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor. The facility ensures that the health care of each resident is under the continuing supervision of a physician. Emergency services from a physician are available and provided to each resident who requires emergency care. MET 0 0.0 0 0.0 Nursing services are provided at all times to meet the needs of residents. MET 5 7.0 335 6.1 Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. Each resident receives care necessary to prevent skin breakdown. Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic			6	8.5	89	1.6	
Emergency services from a physician are available and provided to each resident who requires emergency care. MET 0 0.0 0 0.0 Nursing services are provided at all times to meet the needs of residents. MET 5 7.0 335 6.1 Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. MET 22 31.0 1187 21.7 Each resident receives care necessary to prevent skin breakdown. MET 5 7.0 679 12.4 Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. MET 6 8.5 382 7.0 Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic	treatment changed radically, without consultation with the resident or, if the resident		0	0.0	0	0.0	
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Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. Each resident receives care necessary to prevent skin breakdown. Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic		MET	0	0.0	0	0.0	
skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs. Each resident receives care necessary to prevent skin breakdown. Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. Each resident with a urinary catheter receives proper routine care, including periodic	Nursing services are provided at all times to meet the needs of residents.	МЕТ	5	7.0	335	6.1	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing. Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. MET 6 8.5 382 7.0 Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	skin care, good grooming, and oral hygiene taking into account individual	MET	22	31.0	1187	21.7	
bed sore including proper dressing. MET 6 8.5 382 7.0 Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. MET 6 8.5 382 7.0 14.8	Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training. 16 22.5 807 14.8 Each resident with a urinary catheter receives proper routine care, including periodic		MET	6	8.5	382	7.0	
	care necessary to encourage self control, including frequent toileting and	MET	16	22.5	807	14.8	
		MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a	FACILITY	NUMBE	R & PERCE	NT OF FA	CILITIES	
facility must meet. There are over 500 separate requirements. The information presented		T/ NOT MEETING REQUI				
below does not reflect the severity or the duration of the problems leading to a deficiency. A	пот	ST	ATE	NATION		
deficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	мет	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	мет	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
Perminders The results of the full curvey are available				•		

NURSING HOME PROFILE SHENANDOAH HOME INC

Street Address:		City and State:	
131 EAST THIRD AVENUE		RANSON WV 25438	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	48	NON-PROFIT OTHER	06/18/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
48						
Caution: A large number of residents with these chara	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	42	87.5	83.2	78.3	
Dressing						
Residents requiring some or total assist	ance in dressing.	43	89.6	86.8	76.7	
Toileting	3					
Residents requiring some or total assist	ance in toileting	33	68.8	77.5	63.4	
Transferring	and in tonoung.		30.0			
Residents requiring some or total assist	ance moving from bed to chair or to	00	70.0	00.0	00.0	
tub or toilet.		38	79.2	80.9	66.0	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	44	91.7	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	11	22.9	32.4	29.3	
Completely bedfast residents.		0	0.0	1.8	3.6	
Residents confined to chairs.		22	45.8	49.4	39.1	
Residents requiring restraints.		0	0.0	43.7	31.7	
Tresidents requiring restraints.						
Confined as discussed assistants		33	68.8	62.5	55.8	
Confused or disoriented residents.		33	00.0	02.5	33.0	
			0.0	F 0	4 7	
Residents with bed sores.		3	6.3	5.6	4.7	
Residents receiving special skin care.		1	2.1	29.2	24.0	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			CILITIES		
		STATE		NATION	
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8
	L		1	1	1

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	TION	
		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8	

NURSING HOME PROFILE RAVENSWOOD VILLAGE NSG HM

Street Address:		City and State:	
200 S RITCHIE AVE		RAVENSWOOD WV 26164	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	62	PROPRIETARY	01/14/88

Total Residents on Day of Survey: Medicare Residents: Medicaid Residents:								
54	0	41						
Caution: A large number of residents with these characteristics does not indicate whether those		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate car- highly specialized care and services.	#	%	%	%				
Bathing								
Residents requiring some or total assist	ance in bathing.	50	92.6	83.2	78.3			
Dressing								
Residents requiring some or total assist	ance in dressing.	52	96.3	86.8	76.7			
Toileting								
Residents requiring some or total assist	ance in toileting.	47	87.0	77.5	63.4			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	34	63.0	80.9	66.0			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	45	83.3	71.8	59.1			
Residents on individually written bowel	and bladder retraining program.	7	13.0	5.6	6.1			
Eating								
Residents receiving tube feedings or re-	quiring assistance with eating.	26	48.1	32.4	29.3			
Completely bedfast residents.		1_	1.9	1.8	3.6			
Residents confined to chairs.		27	50.0	49.4	39.1			
Residents requiring restraints.		13	24.1	43.7	31.7			
Confused or disoriented residents.		39	72.2	62.5	55.8			
Residents with bed sores.		3	5.6	5.6	4.7			
Residents receiving special skin care.		15	27.8	29.2	24.0			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NUMBER & PERCENT OF FACILI NOT MEETING REQUIREMENT			
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single stair person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	1 - 1	NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
delicities, that represent all engines process of a city person	NOT MET	STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	2 5.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.		17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE NICHOLAS CNTY HLTH CARE CNTR

Street Address:		City and State:	
18 FOURTH ST		RICHWOOD WV 26261	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	PROPRIETARY	07/17/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
103	0	86			
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care		FAC	FACILITY		NATION
highly specialized care and services.	s. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	93	90.3	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	85	82.5	86.8	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	75	72.8	77.5	63.4
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	69	67.0	80.9	66.0
Continence					
Residents with catheters or partial or to	al loss of bowel or bladder control.	72	69.9	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	1	1.0	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	29	28.2	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		49	47.6	49.4	39.1
Residents requiring restraints.		40	38.8	43.7	31.7
-					
Confused or disoriented residents.		48	46.6	62.5	55.8
Residents with bed sores.		3	2.9	5.6	4.7
Residents receiving special skin care.		34	33.0	29.2	24.0

was deficient in the indicated area at the time of the survey.		*****				
teminder: These 32 selected performance indicators do not represent all the requirements a acidity must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF NOT MEETING REQUIRE				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	ST	ATE	NAT	ION	
		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	МЕТ	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			ATE		ION
		#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the acility or by referral to an appropriate social agency.		18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.		15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8
	-				

NURSING HOME PROFILE CARE INN

47 (1 E 11 VIV								
Street Address:		City and State:						
107 MILLER DR		RIPLEY WV 25271						
Participation:	# of Beds:	Type of Ownership:	Survey Date:					
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	11/13/87					

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
111	4	93					
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care. It may reflect the facility's ability to provide highly specialized care and services.			%	%	%		
Bathing							
Residents requiring some or total assista	ance in bathing.	93	83.8	84.9	81.5		
Dressing							
Residents requiring some or total assista	ance in dressing.	95	85.6	90.0	83.2		
Toileting							
Residents requiring some or total assista	ance in toileting.	89	80.2	85.1	73.8		
Transferring							
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	86	77.5	87.3	77.2		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	77	69.4	76.9	68.2		
Residents on individually written bowel a	and bladder retraining program.	3	2.7	5.2	4.6		
Eating	-						
Residents receiving tube feedings or rec	quiring assistance with eating.	39	35.1	47.4	37.7		
Completely bedfast residents.		0	0.0	2.9	3.4		
Residents confined to chairs.		83	74.8	58.4	50.8		
Residents requiring restraints.		42	37.8	51.1	41.3		
Confused or disoriented residents.		75	67.6	63.4	58.4		
Residents with bed sores.		8	7.2	6.8	7.1		
Residents receiving special skin care.		38	34.2	33.4	31.2		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
	NOT			NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FAC NOT MEETING REQUIREME			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	STATE		+	ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE HAMPSHIRE MEM HOSP

 Street Address:
 City and State:

 549 CENTER AVE
 ROMNEY WV 26757

 Participation:
 # of Beds:
 Type of Ownership:
 Survey Date:

 MEDICARE/MEDICAID SNF/ICF
 30
 PROPRIETARY
 09/17/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
28	0		14			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate car-		FACILITY		STATE	NOITAN	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	26	92.9	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	28	100	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	23	82.1	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	28	100	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	25	89.3	76.9	68.2	
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	5	17.9	47.4	37.7	
Completely bedfast residents.		1	3.6	2.9	3.4	
Residents confined to chairs.		11	39.3	58.4	50.8	
Residents requiring restraints.		6	21.4	51.1	41.3	
Confused or disoriented residents.		15	53.6	63.4	58.4	
Residents with bed sores.		3	10.7	6.8	7.1	
300 300 000						
Residents receiving special skin care.		28	100	33.4	31.2	
Todadina receiving special skill care.						

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	МЕТ	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6
		L	L		

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			CILITIES ENTS		
	NOT	STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning	MET	#	12.0	# # 1100	*
and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE KIDWELLS NSG CNTR INC

Street Address:		City and State:	
550 SIOUX LANE		ROMNEY WV 26757	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	18	NON-PROFIT OTHER	04/02/87

	RESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
18	0	15			
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	18	100	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing	17	94.4	86.8	76.7
Toileting	ance in drossing.	- "	04.4	00.0	70.7
Residents requiring some or total assist	ance in toileting.	13	72.2	77.5	63.4
Transferring Residents requiring some or total assist	ance moving from hed to chair or to				
tub or toilet.	ance moving nom bed to chair or to	18	100	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		15	83.3	71.8	59.1
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1
Eating	5 t - 5				
Residents receiving tube feedings or rec	quiring assistance with eating	7	38.9	32.4	29.3
Treaterne receiving tube recuiring of rec	quining assistance with catting.				
Completely bedfast residents.		3	16.7	1.8	3.6
Completely bearast residents.					
		5	27.8	49.4	39.1
Residents confined to chairs.		3	27.6	45.4	39.1
Residents requiring restraints.		7	38.9	43.7	31.7
Confused or disoriented residents.		11	61.1	62.5	55.8
Residents with bed sores.		2	11.1	5.6	4.7
Residents receiving special skin care.		9	50.0	29.2	24.0
		I	L	1	I

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				A PERCENT OF FACILITY MEETING REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET	ST	ATE %	NAT	ION %	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	МЕТ	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCE		
	NOT	STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE SHENANDOAH MANOR RONCEVERTE

Street Address:	City and State:		
608 GREENBRIER AVE		RONCEVERTE WV 24970	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	96	PROPRIETARY	02/05/88

	RESIDENT CHARACTERIST					
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
86	0	62				
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate call highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	70	81.4	83.2	78.3	
Dressing						
Residents requiring some or total assis:	tance in dressing.	78	90.7	86.8	76.7	
Toileting						
Residents requiring some or total assis	tance in toileting.	70	81.4	77.5	63.4	
Transferring	3					
Residents requiring some or total assistub or toilet.	tance moving from bed to chair or to	86	100	80.9	66.0	
Continence						
Residents with catheters or partial or to	Residents with catheters or partial or total loss of bowel or bladder control.		72.1	71.8	59.1	
Residents on individually written bowel	and bladder retraining program.	3	3.5	5.6	6.1	
Eating						
Residents receiving tube feedings or re	quiring assistance with eating.	24	27.9	32.4	29.3	
Completely bedfast residents.		1	1.2	1.8	3.6	
Residents confined to chairs.		18	20.9	49.4	39.1	
Residents requiring restraints.		35	40.7	43.7	31.7	
-						
Confused or disoriented residents.		45	52.3	62.5	55.8	
Residents with bed sores.		5	5.8	5.6	4.7	
Residents receiving special skin care.	•	7	8.1	29.2	24.0	

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A			R & PERCE			
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION	
	MET	#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REOUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE	+	ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE RIVERSIDE NURSING HOME

Street Address:		City and State:	
6500 MACCORKLE AVE SW		SAINT ALBANS WV 25177	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	98	PROPRIETARY	05/29/87

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	 -			
97	3							
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION			
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	77	79.4	84.9	81.5			
Dressing								
Residents requiring some or total assistance in dressing.			95.9	90.0	83.2			
Toileting								
Residents requiring some or total assist	ance in toileting.	93	95.9	85.1	73.8			
Transferring Residents requiring some or total assistance moving from bed to chair or to			95.9	87.3	77.2			
tub or toilet. Continence			95.9	07.3	11.2			
				70.0				
Residents with catheters or partial or to	tal loss of bowel or bladder control.	77	79.4	76.9	68.2			
Residents on individually written bowel a	and bladder retraining program.	2	2.1	5.2	4.6			
Eating								
Residents receiving tube feedings or requiring assistance with eating.			29.9	47.4	37.7			
Completely bedfast residents.		4	4.1	2.9	3.4			
Residents confined to chairs.		34	35.1	58.4	50.8			
Residents requiring restraints.		24	24.7	51.1	41.3			
Confused or disoriented residents.		70	72.2	63.4	58.4			
Residents with bed sores.		17	17.5	6.8	7.1			
Residents receiving special skin care.		5	5.2	33.4	31.2			
			L		L			

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person. The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed. The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months. Each resident is free from mental and physical abuse. Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	FACILITY MET/ NOT MET MET MET MET MET MET	NOT		201 518 806	2.1 5.5
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed. The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months. Each resident is free from mental and physical abuse. Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	MET MET MET MET	# 0 3 0	% 0.0 6.5 0.0	# 201 518	% 2.1 5.5 1.8
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed. The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months. Each resident is free from mental and physical abuse. Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	MET MET MET	0 3 0	0.0 6.5 0.0	518 168	5.5 1.8
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months. Each resident is free from mental and physical abuse. Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	MET MET NOT MET	3 0	0.0	518	5.5
personal funds. An accounting report is made to each resident in a skilled nursing facility every three months. Each resident is free from mental and physical abuse. Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	MET MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies. Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	MET	17			
Each resident is given privacy during treatment and care of personal needs. Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	NOT MET		37.0	806	_
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident. Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident		10		-	8.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident	мет		21.7	1618	17.1
as space permits. Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident		1	2.2	36	0.4
treatment changed radically, without consultation with the resident or, if the resident	MET	0	0.0	205	2.2
	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	мет	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.		4	8.7	1665	17.6

Designation Throughout and another indicators do not consider the second of the second	FACILITY	NUMBE	D & DEDC	ENT OF FA	CULTIFO
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	MET/			REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ion
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	мет	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8
	-				

05/14/87

NURSING HOME PROFILE AMERICARE SALEM NSG & REHAB CNTR

Street Address:

City and State:

SALEM WV 26426

Participation: # of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF 128 PROPRIETARY

Medicare Residents:	Medicaid Residents:			
15	73			
	FAC	ILITY	STATE	NATIO
e. It may reflect the facility's ability to provide	#	%	%	%
ance in bathing.	113	92.6	84.9	81.5
ance in dressing.	114	93.4	90.0	83.2
ance in toileting.	103	84.4	85.1	73.8
ance moving from bed to chair or to	109	89.3	87.3	77.2
tal loss of howel or bladder control	94	77.0	76.9	68.2
actions of solver of status, control				
and bladdor retraining program	2	1.6	5.2	4.6
and bladder retraining program.			0.2	
Ruiring accietance with cating	50	41.0	17.1	37.7
quiring assistance with eating.	30	71.0	77.7	07.7
	2	1.6	2.9	3.4
	98	80.3	58.4	50.8
	74	60.7	51.1	41.3
	70	57.4	63.4	58.4
	13	10.7	6.8	7.1
		teristics does not indicate whether those e. It may reflect the facility's ability to provide # ance in bathing. ance in dressing. 114 ance in toileting. 103 ance moving from bed to chair or to 109 tal loss of bowel or bladder control. 94 and bladder retraining program. 2 quiring assistance with eating. 50 98 74	15	15 73

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	FACILITY MET/			ENT OF FA	CILITIES
	NOT I			ENT OF FACILITIES REQUIREMENTS	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

teminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented elow does not reflect the severity or the duration of the problems leading to a deficiency. A		MET/ NOT MEET		ERCENT OF FACILITIES		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	ST	ATE	NAT	ION	
deficiency may represent an originity problem of a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through ubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the acility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging n normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
solation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8	

NURSING HOME PROFILE CEDAR RIDGE HEALTH CARE CNTR

Street Address:		City and State:	
302 CEDAR RIDGE RD		SISSONVILLE WV 25320	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	120	PROPRIETARY	06/26/87

	HESIDENT CHARACTERIST				
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
99	0	93			
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	92	92.9	83.2	78.3
Dressing					
Residents requiring some or total assistance in dressing.			96.0	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	85	85.9	77.5	63.4
Transferring	<u> </u>				
Residents requiring some or total assistance moving from bed to chair or to tub or toilet.			96.0	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.		85	85.9	71.8	59.1
Residents on individually written bowel and bladder retraining program.		4	4.0	5.6	6.1
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	26	26.3	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		30	30.3	49.4	39.1
Residents requiring restraints.		43	43.4	43.7	31.7
Confused or disoriented residents.		87	87.9	62.5	55.8
Residents with bed sores.		4	4.0	5.6	4.7
Residents receiving special skin care.		47	47.5	29.2	24.0
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Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		NUMBER & PERCE NOT MEETING F		
below does not reflect the severity or the duration of the problems leading to a deficiency. A		NOT S		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE CARE HAVEN OF SISTERSVILLE

Street Address:		City and State:	
201 WOOD ST		SISTERSVILLE WV 26175	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	05/14/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
45	0		3	37	
Caution: A large number of residents with these characteristics.		FACILITY		STATE	NOITAN
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assista	ance in bathing.	38	84.4	83.2	78.3
Dressing					
Residents requiring some or total assista	ance in dressing.	42	93.3	86.8	76.7
Toileting					
Residents requiring some or total assista	ance in toileting.	42	93.3	77.5	63.4
Transferring					
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	42	93.3	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	40	88.9	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	2	4.4	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	8	17.8	32.4	29.3
					
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		16	35.6	49.4	39.1
Residents requiring restraints.		20	44.4	43.7	31.7
-					
Confused or disoriented residents.		35	77.8	62.5	55.8
Residents with bed sores.		6	13.3	5.6	4.7
		17	37.8	29.2	24.0

was deticient in the indicated area at the time of the survey.	-				
facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FAC NOT MEETING REQUIREME			
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements facility must meet. There are over 500 separate requirements. The information presented			R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency.	A NOT	STATE		NAT	NOi
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.) MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis	s. MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance Specific self-help devices are available when necessary.	e. MET	8	11.3	6 0 1	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each residen according to the instructions of the attending physician.	nt MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	d MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE GLENMARK ASSOC/SPENCER FACILITY

Street Address:		City and State:	
400 CHURCH ST		SPENCER WV 25276	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	60	PROPRIETARY	02/11/87

SELECTED RESIDENT CHARACTERISTICS							
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
35	35 0		31				
Caution: A large number of residents with these characteristics		FAC	ILITY	STATE	NATION		
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	35	100	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	35	100	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	34	97.1	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	34	97.1	80.9	66.0		
Continence							
Residents with catheters or partial or total loss of bowel or bladder control.		29	82.9	71.8	59.1		
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1		
Eating							
Residents receiving tube feedings or red	quiring assistance with eating.	8	22.9	32.4	29.3		
Completely bedfast residents.		0	0.0	1.8	3.6		
Residents confined to chairs.		13	37.1	49.4	39.1		
Residents requiring restraints.		19	54.3	43.7	31.7		
Confused or disoriented residents.		24	68.6	62.5	55.8		
Residents with bed sores.		2	5.7	5.6	4.7		
		4.0	00.0	00.0	040		
Residents receiving special skin care.		10	28.6	29.2	24.0		

was dencient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NOT ST		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	мет	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE MEETING			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NAT	ION	
eficiency may represent an ongoing problem or a one-time failure of a single staff person.		#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
					•	

NURSING HOME PROFILE SUMMERSVILLE MEMORIAL HOSP D/P SNF

Street Address:		City and State:	
400 FAIRVIEW HEIGHTS ROAD		SUMMERSVILLE WV 26651	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	44	LOCAL GOVERNMENT	10/15/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
43 2					
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate ca highly specialized care and services.	re. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assis	tance in bathing.	39	90.7	84.9	81.5
Dressing					
Residents requiring some or total assis	tance in dressing.	42	97.7	90.0	83.2
Toileting					
Residents requiring some or total assis	tance in toileting.	41	95.3	85.1	73.8
Transferring					
Residents requiring some or total assis	tance moving from bed to chair or to	41	95.3	87.3	77.2
tub or toilet. Continence		41	90.0	07.3	11.2
Residents with catheters or partial or to	otal loss of bowel or bladder control.	43	100	76.9	68.2
Residents on individually written bowel	and bladder retraining program.	3	7.0	5.2	4.6
Eating					
Residents receiving tube feedings or re	quiring assistance with eating.	17	39.5	47.4	37.7
Completely bedfast residents.		2	4.7	2.9	3.4
Residents confined to chairs.		34	79.1	58.4	50.8
Residents requiring restraints.		26	60.5	51.1	41.3
itosiasino requimig rectianto.					
		36	83.7	63.4	58.4
Confused or disoriented residents.		30	03.7	00.4	30.4
			00.0	0.0	7.4
Residents with bed sores.		14	32.6	6.8	7.1
Residents receiving special skin care.		6	14.0	33.4	31.2

FACILITY MET/				
NOT	STATE		NAT	ION
MET	#	%	#	%
MET	0	0.0	201	2.1
MET	3	6.5	518	5.5
MET	0	0.0	168	1.8
NOT MET	17	37.0	806	8.5
MET	10	21.7	1618	17.1
MET	1	2.2	36	0.4
MET	0	0.0	205	2.2
MET	0	0.0	30	0.3
MET	2	4.3	145	1.5
MET	0	0.0	49	0.5
MET	4	8.7	508	5.4
MET	14	30.4	2816	29.8
NOT MET	4	8.7	1733	18.3
NOT MET	6	13.0	1052	11.1
NOT MET	9	19.6	1512	16.0
MET	4	8.7	1665	17.6
	MET/ NOT MET MET MET MET MET MET MET MET	MET/ NOT ST #	MET/ NOT MEETING STATE # % MET	MET/ NOT MEETING REQUIREM STATE NAT MET

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an engaging problem or a condition to the problems are single staff parson.				ENT OF FA REQUIREM	
		STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	NOT MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE BRAXTON HEALTH CARE CENTER

Street Address:		City and State:	
P.O. BOX 661		SUTTON WV 26601	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICF	65	PROPRIETARY	07/23/87

	RESIDENT CHARACTERIST Medicare Residents:		oid Boois	donto	
Total Residents on Day of Survey:	Medicare Hesidents:	Medicaid Residents:			
59	0		4	7	
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care			ILITY	STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	40	67.8	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	47	79.7	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	40	67.8	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	59	100	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	46	78.0	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	6	10.2	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	16	27.1	32.4	29.3
Completely bedfast residents.		0	0.0	1.8	3.6
Residents confined to chairs.		19	32.2	49.4	39.1
Residents requiring restraints.		30	50.8	43.7	31.7
Confused or disoriented residents.		27	45.8	62.5	55.8
Residents with bed sores.		3	5.1	5.6	4.7
Residents receiving special skin care.		14	23.7	29.2	24.0

was deficient in the indicated area at the time of the survey.						
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			R & PERCE MEETING		FACILITIES REMENTS	
		STATE		NAT	ION	
		#	%	#	%	
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2	
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6	
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4	
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3	
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6	
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5	
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6	
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0	
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5	
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0	
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1	
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7	
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4	
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0	
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8	
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8	

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A				ENT OF FA REQUIREM	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION
	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	NOT MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE CORTLAND ACRES NRS HOME

Street Address:

PO BOX 98 RT 219

THOMAS WV 26292

Participation:

of Beds: Type of Ownership: Survey Date:

MEDICARE/MEDICAID SNF/ICF

94

NON-PROFIT PRIVATE

10/23/87

	RESIDENT CHARACTERIST	100				
Total Residents on Day of Survey:	Medicare Residents:	Medic	Medicaid Residents:			
94	3	80				
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car	cteristics does not indicate whether those	FACILITY		STATE	NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	94	100	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	87	92.6	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	73	77.7	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	74	78.7	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of howel or bladder control	53	56.4	76.9	68.2	
residents with catheters of partial of to	tai loss of bower of bladder control.	00	00.1	1 0.0		
Residents on individually written bowel	and bladdor rotraining program	1	1.1	5.2	4.6	
Residents on individually written bowel and bladder retraining program. Eating			1	0.2	1.0	
	multiple and interest with pating	38	40.4	47.4	37.7	
Residents receiving tube feedings or rec	quiring assistance with eating.	00	70.7	77.7	07.7	
Completely hadfact residents		0	0.0	2.9	3.4	
Completely bedfast residents.			0.0	2.3	3.4	
		28	29.8	58.4	50.8	
Residents confined to chairs.		20	29.0	36.4	50.8	
		EZ	60.6	51.1	41.0	
Residents requiring restraints.		57	60.6	31.1	41.3	
•		50	50.4	00.4	50.4	
Confused or disoriented residents.		53	56.4	63.4	58.4	
		_				
Residents with bed sores.		7	7.4	6.8	7.1	
Residents receiving special skin care.		5	5.3	33.4	31.2	

was deficient in the indicated area at the time of the survey.				***	
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.			R & PERCE MEETING		
		STATE		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	мет	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an engaging problem are a one time failure of a single staff page.				ENT OF FA REOUIREM	
		STATE		NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	мет	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	NOT MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE WAYNE CONTINUOUS CARE CTR

Street Address:		City and State:				
RTE 1 BOX 1372		WAYNE WV 25570				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	60	PROPRIETARY	02/05/88			

SELECTED RESIDENT CHARACTERISTICS								
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:						
58	0	58						
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION			
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%			
Bathing								
Residents requiring some or total assist	ance in bathing.	49	84.5	83.2	78.3			
Dressing								
Residents requiring some or total assist	ance in dressing.	49	84.5	86.8	76.7			
Toileting								
Residents requiring some or total assist	ance in toileting.	49	84.5	77.5	63.4			
Transferring								
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	41	70.7	80.9	66.0			
Continence								
Residents with catheters or partial or to	tal loss of bowel or bladder control.	41	70.7	71.8	59.1			
Residents on individually written bowel	and bladder retraining program.	4	6.9	5.6	6.1			
Eating								
Residents receiving tube feedings or re-	quiring assistance with eating.	20	34.5	32.4	29.3			
Completely bedfast residents.		0	0.0	1.8	3.6			
					1			
Residents confined to chairs.		33	56.9	49.4	39.1			
Residents requiring restraints.		30	51.7	43.7	31.7			
Confused or disoriented residents.		33	56.9	62.5	55.8			
Residents with bed sores.		3	5.2	5.6	4.7			
Residents receiving special skin care.		13	22.4	29.2	24.0			

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FA REQUIREM	
		ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NAT	ION	
deficiency may represent an ongoing problem of a one-time failure of a single stan person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0	
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	
	1					

NURSING HOME PROFILE WEIRTON CONVALESCENT CENTER

Street Address:		City and State:			
2525 PENNSYLVANIA AVE		WEIRTON WV 26062			
Participation:	# of Beds:	Type of Ownership:	Survey Date:		
MEDICARE/MEDICAID SNF/ICF	119	PROPRIETARY	12/11/87		

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
117	0	,	10	06	
Caution: A large number of residents with these charac residents are receiving appropriate or inappropriate care		FACILITY		STATE	NATION
highly specialized care and services.	. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	103	88.0	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	108	92.3	90.0	83.2
Toileting					
Residents requiring some or total assista	ance in toileting.	89	76.1	85.1	73.8
Transferring					
Residents requiring some or total assistatub or toilet.	ance moving from bed to chair or to	115	98.3	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	92	78.6	76.9	68.2
Residents on individually written bowel a	and bladder retraining program.	3	2.6	5.2	4.6
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	49	41.9	47.4	37.7
Completely bedfast residents.		0	0.0	2.9	3.4
Residents confined to chairs.		49	41.9	58.4	50.8
Residents requiring restraints.		83	70.9	51.1	41.3
Confused or disoriented residents.		103	88.0	63.4	58.4
Residents with bed sores.		2	1.7	6.8	7.1
Residents receiving special skin care.		64	54.7	33.4	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			PERCENT OF FACILITIES	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	NOT MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency.		NUMBER & PERCENT OF FACILI NOT MEETING REQUIREMENT			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE			ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	NOT MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE WIERTON MEDICAL CENTER DP/SNF

Street Address:		City and State:	
601 COLLIERS WAY		WEIRTON WV 26062	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF	265	NON-PROFIT OTHER	04/07/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
3	2			0		
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION	
residents are receiving appropriate or inappropriate car- highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	3	100	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	3	100	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	3	100	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	3	100	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	3	100	76.9	68.2	
Residents on individually written bowel	and bladder retraining program.	1	33.3	5.2	4.6	
Eating						
Residents receiving tube feedings or re-	quiring assistance with eating.	2	66.7	47.4	37.7	
Completely bedfast residents.		0	0.0	2.9	3.4	
Residents confined to chairs.		2	66.7	58.4	50.8	
Residents requiring restraints.		1	33.3	51.1	41.3	
Confused or disoriented residents.		2	66.7	63.4	58.4	
Residents with bed sores.		1	33.3	6.8	7.1	
Residents receiving special skin care.		1	33.3	33.4	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
	NOT	ST	ATE	NAT	ION
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE WELCH EMERGENCY HOSP DP/ICF

Street Address:		City and State:	
454 MCDOWELL ST		WELCH WV 24801	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICAID ICE	124	STATE GOVERNMENT	06/30/87

SELECTEL	RESIDENT CHARACTERIST	ics			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
41	0	36			
Caution: A large number of residents with these chara-		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate care highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	41	100	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing.	41	100	86.8	76.7
Toileting					
Residents requiring some or total assist	ance in toileting.	38	92.7	77.5	63.4
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	30	73.2	80.9	66.0
Continence					
Residents with catheters or partial or total loss of bowel or bladder control.			36.6	71.8	59.1
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	18	43.9	32.4	29.3
Completely bedfast residents.		1	2.4	1.8	3.6
Residents confined to chairs.		30	73.2	49.4	39.1
Residents requiring restraints.		0	0.0	43.7	31.7
-					
Confused or disoriented residents.		23	56.1	62.5	55.8
Residents with bed sores.		5	12.2	5.6	4.7
Residents receiving special skin care.		5	12.2	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT	STATE		NATION	
	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	NOT MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	NOT MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	NOT MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	NOT MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	NOT MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	МЕТ	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FA	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	NOT MET	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Orugs are administered according to the written orders of the attending physician.		28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.		17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	NOT MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8

NURSING HOME PROFILE VALLEY HAVEN GERIATRIC CTR

	VALLET HAVEN GEHIATHIO OTH								
Street Address:			City and State:						
RD 2 BOX 44			WELLSBURG WV 26070						
Participation:	#	of Beds:	Type of Ownership:	Survey Date:					
MEDICAID ICF		60	PROPRIETARY	06/12/87					

	RESIDENT CHARACTERIST						
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:					
59	0		3	6			
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate care		FAC	ILITY	STATE	NATION		
highly specialized care and services.	e. It may remost the lability of ability to provide	#	%	%	%		
Bathing							
Residents requiring some or total assist	ance in bathing.	19	32.2	83.2	78.3		
Dressing							
Residents requiring some or total assist	ance in dressing.	51	86.4	86.8	76.7		
Toileting							
Residents requiring some or total assist	ance in toileting.	43	72.9	77.5	63.4		
Transferring							
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	44	74.6	80.9	66.0		
Continence							
Residents with catheters or partial or to	tal loss of bowel or bladder control.	36	61.0	71.8	59.1		
Residents on individually written bowel	and bladder retraining program.	0	0.0	5.6	6.1		
Eating	<u> </u>						
Residents receiving tube feedings or rec	quiring assistance with eating.	18	30.5	32.4	29.3		
Completely bedfast residents.		1	1.7	1.8	3.6		
-							
Residents confined to chairs.		13	22.0	49.4	39.1		
Residents requiring restraints.		31	52.5	43.7	31.7		
Confused or disoriented residents.		34	57.6	62.5	55.8		
Residents with bed sores.		5	8.5	5.6	4.7		
Residents receiving special skin care.		5	8.5	29.2	24.0		
nesidents receiving special skill care.			0.0				

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCE		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	ΠΑΙΛ	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	МЕТ	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
ugs to control behavior and physical restraints are only used when authorized by a ysician in writing for a specified period of time or in emergencies.		26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.		19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT		ATE		ION	
deficiency may represent an ongoing problem of a one-time failure of a single staff person.	MET	#	%	#	%	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	1	1.4	255	4.7	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	мет	8	11.3	748	13.7	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	8	11.3	601	11.0	
Orugs are administered according to the written orders of the attending physician.		28	39.4	1385	25.3	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	17	23.9	1045	19.1	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	МЕТ	11	15.5	269	4.9	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	18	25.4	311	5.7	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	15	21.1	481	8.8	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8	
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	15	21.1	1064	19.4	
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4	
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0	
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0	
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	34	47.9	2452	44.8	

NURSING HOME PROFILE BISHOP J H HODGES CONT CARE CTR

Street Address:		City and State:	
MEDICAL PARK		WHEELING WV 26003	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	NON-PROFIT OTHER	10/30/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
113	18		6	0		
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may reflect the facility a ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assist	ance in bathing.	82	72.6	84.9	81.5	
Dressing						
Residents requiring some or total assist	ance in dressing.	107	94.7	90.0	83.2	
Toileting						
Residents requiring some or total assist	ance in toileting.	106	93.8	85.1	73.8	
Transferring						
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	107	94.7	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control	87	77.0	76.9	68.2	
Treatment of the second of the	tal 1000 01 Dellor of Diagram Control					
Residents on individually written bowel	and bladder retraining program	6	5.3	5.2	4.6	
Eating	and bladder retraining program.					
Residents receiving tube feedings or re-	quiring assistance with eating	80	70.8	47.4	37.7	
Theorem 1000 mily tube 1000 mily of 100	quining assistance with cating.					
Completely bedfast residents.		0	0.0	2.9	3.4	
Residents confined to chairs.		50	44.2	58.4	50.8	
Residents requiring restraints.		36	31.9	51.1	41.3	
•						
Confused or disoriented residents.		54	47.8	63.4	58.4	
Residents with bed sores.		14	12.4	6.8	7.1	
Residents receiving special skin care.		48	42.5	33.4	31.2	
Troducting special skill care.				1		

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		ER & PERCENT OF FACILITIES T MEETING REQUIREMENTS		
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	ST	ATE	NAT	ION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	мет	0	0.0	168	1.8
Orugs to control behavior and physical restraints are only used when authorized by a hysician in writing for a specified period of time or in emergencies.		17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	мет	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	мет	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

eminder: These 32 selected performance indicators do not represent all the requirements a cility must meet. There are over 500 separate requirements. The information presented blow does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.				ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT		ATE		ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	# 6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	NOT MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	10	21.7	1662	17.6
Orugs are administered according to the written orders of the attending physician.		21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8

NURSING HOME PROFILE GOOD SHEPHERD NURSING HOME

Street Address:		City and State:	
159 EDGINGTON LANE		WHEELING WV 26003	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	192	NON-PROFIT RELIGIOUS	05/15/87

Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:				
187	0		8	8		
Caution: A large number of residents with these characteristics are receiving appropriate or inappropriate care	cteristics does not indicate whether those	FAC	ILITY	STATE	NATION	
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%	
Bathing						
Residents requiring some or total assista	ance in bathing.	126	67.4	84.9	81.5	
Dressing						
Residents requiring some or total assista	ance in dressing.	159	85.0	90.0	83.2	
Toileting						
Residents requiring some or total assista	ance in toileting.	145	77.5	85.1	73.8	
Transferring						
Residents requiring some or total assistate tub or toilet.	ance moving from bed to chair or to	144	77.0	87.3	77.2	
Continence						
Residents with catheters or partial or to	tal loss of bowel or bladder control.	136	72.7	76.9	68.2	
ricolacine with autotore of partial of to	ar 1000 of bower of bladder deficient					
Residents on individually written bowel a	and bladder retraining program.	0	0.0	5.2	4.6	
Eating						
Residents receiving tube feedings or rec	quiring assistance with eating.	50	26.7	47.4	37.7	
Completely bedfast residents.		12	6.4	2.9	3.4	
Residents confined to chairs.		79	42.2	58.4	50.8	
Residents requiring restraints.		59	31.6	51.1	41.3	
Confused or disoriented residents.		132	70.6	63.4	58.4	
Residents with bed sores.		6	3.2	6.8	7.1	
Residents receiving special skin care.		30	16.0	33.4	31.2	

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/		R & PERCI MEETING		
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	NOT MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
ach resident is allowed to retain and use his/her personal possessions and clothing space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	МЕТ	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	NOT MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.	NOT MET		STATE		ION
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	MET	4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.		12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.		11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8

NURSING HOME PROFILE PETERSON HOSP

Street Address:		City and State:	
HOMESTEAD AVE		WHEELING WV 26003	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	150	NON-PROFIT OTHER	08/07/87

SELECTED RESIDENT CHARACTERISTICS

SELECTEL	RESIDENT CHARACTERIST	103			
Total Residents on Day of Survey:	Medicare Residents:	Medicaid Residents:			
146	11		5	0	
Caution: A large number of residents with these chara residents are receiving appropriate or inappropriate car		FAC	ILITY	STATE	NATION
highly specialized care and services.	e. It may reflect the facility's ability to provide	#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	130	89.0	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing.	139	95.2	90.0	83.2
Toileting					
Residents requiring some or total assist	ance in toileting.	134	91.8	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	146	100	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	114	78.1	76.9	68.2
Residents on individually written bowel	and bladder retraining program.	3	2.1	5.2	4.6
Eating	and Sladde. Totalining programs				
Residents receiving tube feedings or re	quiring assistance with eating.	70	47.9	47.4	37.7
Completely bedfast residents.		4	2.7	2.9	3.4
Residents confined to chairs.		102	69.9	58.4	50.8
Residents requiring restraints.		94	64.4	51.1	41.3
-					
Confused or disoriented residents.		78	53.4	63.4	58.4
Residents with bed sores.		14	9.6	6.8	7.1
Residents receiving special skin care.		27	18.5	33.4	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		ST	ATE	NAT	ION
		#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	NOT MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.		10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	NOT MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.	NOT MET	4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	NOT MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	NOT MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITIES NOT MEETING REQUIREMENTS				
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		NOT STATE		NAT	ION	
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.		6	13.0	1123	11.9	
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6	
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	NOT MET	10	21.7	1662	17.6	
Drugs are administered according to the written orders of the attending physician.	NOT MET	21	45.7	2739	29.0	
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.	МЕТ	4	8.7	1389	14.7	
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		1	2.2	587	6.2	
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	NOT MET	8	17.4	816	8.6	
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	NOT MET	14	30.4	1099	11.6	
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	NOT MET	8	17.4	1270	13.4	
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	12	26.1	1216	12.9	
All common resident areas are clean, sanitary and free of odors.	NOT MET	11	23.9	1041	11.0	
All essential mechanical and electrical equipment is maintained in safe operating condition.	NOT MET	4	8.7	1413	14.9	
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9	
Isolation techniques to prevent the spread of infection are followed by all personnel.	NOT MET	17	37.0	2340	24.7	
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4	
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	15	32.6	4050	42.8	
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NURSING HOME PROFILE WHITE SULPHUR SPRINGS FAMILY CR CTR

Street Address:		City and State:				
BOX H RT 92 AT RT 60		WHITE SULPHUR SPRINGS WV 24986				
Participation:	# of Beds:	Type of Ownership:	Survey Date:			
MEDICAID ICF	62	PROPRIETARY	01/29/88			

SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:		aid Resi	dents:	
Total Residents on Day of Survey.	medicale fresidents.	Medicaid Residents:			
58	0		4	.0	
Caution: A large number of residents with these chara- residents are receiving appropriate or inappropriate car-		FAC	ILITY	STATE	NATION
highly specialized care and services.		#	%	%	%
Bathing					
Residents requiring some or total assist	ance in bathing.	44	75.9	83.2	78.3
Dressing					
Residents requiring some or total assist	ance in dressing	47	81.0	86.8	76.7
Toileting	ance in dressing.	7,	01.0	00.0	70.7
-					
Residents requiring some or total assist	ance in toileting.	35	60.3	77.5	63.4
Transferring	and marriag from had to obair or to				
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	45	77.6	80.9	66.0
Continence					
Residents with catheters or partial or to	tal loss of howel or bladder control	35	60.3	71.8	59.1
Tresidents with catheters of partial of to	tal loss of bowel of bladder control.	00	00.0	7 1.0	00.1
Residents on individually written bowel	and bladder retraining program.	13	22.4	5.6	6.1
Eating					
Residents receiving tube feedings or rec	quiring assistance with eating.	18	31.0	32.4	29.3
					:
Completely bedfast residents.		0	0.0	1.8	3.6
- Completely Bounder residents.					
		10	00.0	40.4	00.4
Residents confined to chairs.		19	32.8	49.4	39.1
Residents requiring restraints.		26	44.8	43.7	31.7
Confused or disoriented residents.		34	58.6	62.5	55.8
Bankla at a selle bank		3	5.2	5.6	4.7
Residents with bed sores.		3	5.2	3.0	4.7
Residents receiving special skin care.		25	43.1	29.2	24.0

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/	NUMBER & PERCENT OF FACILITY NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	TION
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	1	1.4	65	1.2
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.	MET	6	8.5	198	3.6
Each resident is free from mental and physical abuse.	MET	1	1.4	79	1.4
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	26	36.6	564	10.3
Each resident is given privacy during treatment and care of personal needs.	MET	19	26.8	798	14.6
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.		2	2.8	25	0.5
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.		6	8.5	89	1.6
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.		0	0.0	0	0.0
The facility ensures that the health care of each resident is under the continuing supervision of a physician.		1	1.4	25	0.5
Emergency services from a physician are available and provided to each resident who requires emergency care.		0	0.0	0	0.0
Nursing services are provided at all times to meet the needs of residents.	MET	5	7.0	335	6.1
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	NOT MET	22	31.0	1187	21.7
Each resident receives care necessary to prevent skin breakdown.	MET	5	7.0	679	12.4
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	8.5	382	7.0
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	16	22.5	807	14.8
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	5.6	700	12.8

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented	FACILITY MET/			ENT OF FACILITIES REQUIREMENTS	
below does not reflect the severity or the duration of the problems leading to a deficiency. A deficiency may represent an ongoing problem or a one-time failure of a single staff person.		STATE		NAT	ION
deficiency may represent an origining problem of a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	МЕТ	1	1.4	255	4.7
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	8	11.3	748	13.7
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.	MET	8	11.3	601	11.0
Drugs are administered according to the written orders of the attending physician.	NOT MET	28	39.4	1385	25.3
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.		17	23.9	1045	19.1
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.		11	15.5	269	4.9
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.		18	25.4	311	5.7
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.		15	21.1	481	8.8
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.	MET	13	18.3	479	8.8
Toilet and bath facilities are clean, sanitary, and free of odors.	NOT MET	15	21.1	1064	19.4
All common resident areas are clean, sanitary and free of odors.	MET	13	18.3	1169	21.4
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	0	0.0	0	0.0
Resident care equipment is clean and maintained in safe operating condition.	MET	0	0.0	0	0.0
Isolation techniques to prevent the spread of infection are followed by all personnel.	MET	0	0.0	0	0.0
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	5	7.0	267	4.9
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	NOT MET	34	47.9	2452	44.8

NURSING HOME PROFILE MINGO HEALTH CARE CENTER INC

Street Address:		City and State:	
PO BOX 1210		WILLIAMSON WV 25661	
Participation:	# of Beds:	Type of Ownership:	Survey Date:
MEDICARE/MEDICAID SNF/ICF	120	PROPRIETARY	05/22/87

SELECTED RESIDENT CHARACTERISTICS

Total Residents on Day of Survey:	Medicare Residents:	Medic	aid Resi	dents:	
114	5		c	18	
Caution: A large number of residents with these chara		FAC	ILITY	STATE	NATION
residents are receiving appropriate or inappropriate car highly specialized care and services.		#	%	%	%
Bathing				-	
Residents requiring some or total assist	ance in bathing.	107	93.9	84.9	81.5
Dressing					
Residents requiring some or total assist	ance in dressing	111	97.4	90.0	83.2
Toileting	and in diedenig.		07.1	00.0	00.2
Residents requiring some or total assist	ance in toileting.	110	96.5	85.1	73.8
Transferring					
Residents requiring some or total assist tub or toilet.	ance moving from bed to chair or to	91	79.8	87.3	77.2
Continence					
Residents with catheters or partial or to	tal loss of bowel or bladder control.	110	96.5	76.9	68.2
Residents on individually written bowel	and bladder retraining program.	9	7.9	5.2	4.6
Eating					
Residents receiving tube feedings or re-	quiring assistance with eating.	72	63.2	47.4	37.7
Completely bedfast residents.		11	0.9	2.9	3.4
Residents confined to chairs.		71	62.3	58.4	50.8
Residents requiring restraints.		69	60.5	51.1	41.3
-					
Confused or disoriented residents.		0	0.0	63.4	58.4
Residents with bed sores.		11	9.6	6.8	7.1
Residents receiving special skin care.		28	24.6	33.4	31.2

was deficient in the indicated area at the time of the survey.					
Reminder: These 32 selected performance indicators do not represent all the requirements a acility must meet. There are over 500 separate requirements. The information presented		NUMBER & PERCENT OF FACILITIE NOT MEETING REQUIREMENTS			
below does not reflect the severity or the duration of the problems leading to a deficiency. A	NOT	STATE		NATION	
ciency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
The facility ensures that its written procedures regarding the rights and responsibilities of residents are followed.	MET	0	0.0	201	2.1
The facility uses a system that assures full and complete accounting of residents' personal funds. An accounting report is made to each resident in a skilled nursing facility every three months.		3	6.5	518	5.5
Each resident is free from mental and physical abuse.	MET	0	0.0	168	1.8
Drugs to control behavior and physical restraints are only used when authorized by a physician in writing for a specified period of time or in emergencies.	MET	17	37.0	806	8.5
Each resident is given privacy during treatment and care of personal needs.	MET	10	21.7	1618	17.1
Each resident is allowed to communicate, associate and meet privately with individuals of his/her choice unless this infringes upon the rights of another resident.	MET	1	2.2	36	0.4
Each resident is allowed to retain and use his/her personal possessions and clothing as space permits.	MET	0	0.0	205	2.2
Except in a medical emergency, a resident is not transferred or discharged, nor is treatment changed radically, without consultation with the resident or, if the resident is incompetent, without prior notification of next of kin or sponsor.	MET	0	0.0	30	0.3
The facility ensures that the health care of each resident is under the continuing supervision of a physician.	MET	2	4.3	145	1.5
Emergency services from a physician are available and provided to each resident who requires emergency care.	MET	0	0.0	49	0.5
Nursing services are provided at all times to meet the needs of residents.		4	8.7	508	5.4
Each resident receives daily personal hygiene as needed to assure cleanliness, good skin care, good grooming, and oral hygiene taking into account individual preferences. Residents are encouraged to take care of their own self care needs.	MET	14	30.4	2816	29.8
Each resident receives care necessary to prevent skin breakdown.	MET	4	8.7	1733	18.3
Each resident with a bed sore receives care necessary to promote the healing of the bed sore including proper dressing.	MET	6	13.0	1052	11.1
Each resident who has problems with bowel and bladder control is provided with care necessary to encourage self control, including frequent toileting and opportunities for rehabilitative training.	MET	9	19.6	1512	16.0
Each resident with a urinary catheter receives proper routine care, including periodic evaluation.	MET	4	8.7	1665	17.6

Reminder: These 32 selected performance indicators do not represent all the requirements a facility must meet. There are over 500 separate requirements. The information presented below does not reflect the severity or the duration of the problems leading to a deficiency. A		NUMBER & PERCENT OF FACILITIES NOT MEETING REOUIREMENTS			
		STATE		NATION	
deficiency may represent an ongoing problem or a one-time failure of a single staff person.	MET	#	%	#	%
Each resident receives proper care for injections (shots), fluids supplied through tubes, colostomy/ileostomy, respiratory (breathing) and tracheotomy care, suctioning and tube feeding.	MET	6	13.0	1123	11.9
Each resident receives rehabilitative nursing care to promote maximum physical functioning to prevent loss of ability to walk or move freely, deformities and paralysis.	MET	4	8.7	2045	21.6
Each resident needing assistance in eating or drinking is provided prompt assistance. Specific self-help devices are available when necessary.		10	21.7	1662	17.6
Drugs are administered according to the written orders of the attending physician.	MET	21	45.7	2739	29.0
Menus are planned and followed to meet the nutritional needs of each resident in accordance with physicians' orders, and to the extent medically possible, based on the recommended dietary allowances of the Food and Nutrition Board of the National Research Council, National Academy of Sciences.		4	8.7	1389	14.7
Therapy is provided according to orders of the attending physician in accordance with accepted professional practices by qualified therapists or qualified assistants.	MET	1	2.2	587	6.2
Services are provided to meet the residents' social and emotional needs by the facility or by referral to an appropriate social agency.	MET	8	17.4	816	8.6
An ongoing program of meaningful activities is provided, based on identified needs and interests of each resident. It is designed to promote opportunities for engaging in normal pursuits, including religious activities of the resident's choice, if any.	MET	14	30.4	1099	11.6
Appropriate staff develop and implement a written health care plan for each resident according to the instructions of the attending physician.		8	17.4	1270	13.4
Toilet and bath facilities are clean, sanitary, and free of odors.	MET	12	26.1	1216	12.9
All common resident areas are clean, sanitary and free of odors.	MET	11	23.9	1041	11.0
All essential mechanical and electrical equipment is maintained in safe operating condition.	MET	4	8.7	1413	14.9
Resident care equipment is clean and maintained in safe operating condition.	MET	3	6.5	1408	14.9
solation techniques to prevent the spread of infection are followed by all personnel.		17	37.0	2340	24.7
The facility has available at all times a quantity of linen essential for proper care and comfort of residents.	MET	3	6.5	700	7.4
Food is stored, refrigerated, prepared, distributed, and served under sanitary conditions.	MET	15	32.6	4050	42.8





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